

# PREA Facility Audit Report: Final

**Name of Facility:** Santa Rosa Correctional Facility

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** NA

**Date Final Report Submitted:** 07/28/2019

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input checked="" type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input checked="" type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input checked="" type="checkbox"/>
<b>Auditor Full Name as Signed:</b> Brian C. Sutherland	<b>Date of Signature:</b> 07/28/2019

AUDITOR INFORMATION	
<b>Auditor name:</b>	Sutherland, Brian
<b>Address:</b>	
<b>Email:</b>	bcsuther@gmail.com
<b>Telephone number:</b>	
<b>Start Date of On-Site Audit:</b>	06/11/2019
<b>End Date of On-Site Audit:</b>	06/14/2019

<b>FACILITY INFORMATION</b>	
<b>Facility name:</b>	Santa Rosa Correctional Facility
<b>Facility physical address:</b>	5850 East Milton Road, Milton, Florida - 32583
<b>Facility Phone</b>	(850) 983-5800
<b>Facility mailing address:</b>	

<b>Primary Contact</b>	
<b>Name:</b>	Jessica Santiago
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<b>Warden/Jail Administrator/Sheriff/Director</b>	
<b>Name:</b>	Walker Clemmons
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<b>Facility PREA Compliance Manager</b>	
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<b>Facility Health Service Administrator On-site</b>	
<b>Name:</b>	Kady Hall
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<b>Facility Characteristics</b>	
<b>Designed facility capacity:</b>	3046
<b>Current population of facility:</b>	2943
<b>Average daily population for the past 12 months:</b>	
<b>Has the facility been over capacity at any point in the past 12 months?</b>	No
<b>Which population(s) does the facility hold?</b>	
<b>Age range of population:</b>	
<b>Facility security levels/inmate custody levels:</b>	Level 6 / Close, Medium, Minimum and Community
<b>Does the facility hold youthful inmates?</b>	No
<b>Number of staff currently employed at the facility who may have contact with inmates:</b>	732
<b>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</b>	
<b>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</b>	

AGENCY INFORMATION	
<b>Name of agency:</b>	Florida Department of Corrections
<b>Governing authority or parent agency (if applicable):</b>	
<b>Physical Address:</b>	501 S Calhoun Street, Tallahassee, Florida - 32399
<b>Mailing Address:</b>	
<b>Telephone number:</b>	850-488-5021

Agency Chief Executive Officer Information:	
<b>Name:</b>	Mark Inch
<b>Email Address:</b>	Mark.Inch@fdc.myflorida.com
<b>Telephone Number:</b>	850-488-5021

Agency-Wide PREA Coordinator Information			
<b>Name:</b>	Judy Cardinez	<b>Email Address:</b>	Judy.Cardinez@fdc.myflorida.com

## AUDIT FINDINGS

### **Narrative:**

The auditor's description of the audit methodology should include a detailed description of the following processes during the pre-audit, on-site audit, and post-audit phases: documents and files reviewed, discussions and types of interviews conducted, number of days spent on-site, observations made during the site-review, and a detailed description of any follow-up work conducted during the post-audit phase. The narrative should describe the techniques the auditor used to sample documentation and select interviewees, and the auditor's process for the site review.

### Pre-Audit Phase:

The Santa Rosa Correctional Institution entered into contract for the Prison Rape Elimination Act (PREA) auditing services with PREA Auditors of America, LLC on April 6, 2019. The primary sole auditor is Brian Sutherland and no conflict of interest exists between the two parties. Brian is a twenty-four year correctional veteran attempting to complete the PREA auditor certification process. The Department of Justice requires probationary auditors to receive feedback from the National PREA Resource Center during the reporting phase to determine final certification. The terms of this contract began on April 16, 2019, and conclude on or before July 26, 2019 with the submission of the final report. The contract explained the efforts toward transparency, the role of third parties and support staff, compliance considerations regarding the PREA Standards, Department of Justice certification requirements, enough time to conduct the audit, and planning for any corrective action phases. The amount of time to complete the final report could extend past the July 26, 2019, date discussed due to a possible 180-day corrective action period. No corrective action period was required throughout the conclusion of this audit. The contract specified the on-site review conducted on June 11, 12, 13, & 14, 2019, and the final contract submission included the standard provisions 401- 405. The Florida Department of Corrections operates the Santa Rosa Correctional Institution, and this facility is part of Region One. The Santa Rosa Correctional Institution includes three separate locations: Main Unit, Annex, and Work Camp, and is located at 5850 East Milton Road Milton, Florida 32583. No initial barriers exist toward the completion of the audit and the PREA compliance Manager was established as the facility point of contact. No third-party entity exists between PREA Auditors of America, LLC and the Santa Rosa Correctional Institution to include: private contractors, operators, facilities, governmental entities, or ACA paid affiliates.

The pre-audit phase began on April 6, 2019, during the contract negotiation process as the auditor reviewed the Santa Rosa Correctional Institution website for information relating to PREA. The website confirmed the second phase PREA audit was conducted on June 1, 2, & 3, 2019, and the facility was found in compliance on 40 standards, standard 115.13 was found non-compliant, and 2 standards were not applicable. The auditor reviewed the 2016 PREA Audit Report posted on the Agency website and documented all previously recommended corrective action responses. The website included data collection reports from 2012 through 2017 and the auditor noted no reports posted for 2018. This review began the issue log communication process between the PREA Compliance Manager, PREA Coordinator, and the PREA Auditor. The first issue log indicated the reports for 2018 were not posted on the facility website. The PREA Compliance Manager presented reports and the auditor verified the reports were completed. The PREA Compliance Manager confirmed the reports were posted to the facility website as required in standard 115.88, and the auditor verified this process by reviewing the reports on the website for 2018. The report 2019 will be posted to the website at the end of the annual review. The auditor prepared a timeline of events, issue log, and corrective action notations file at this time and informed the PREA Compliance Manager regarding the issue log communication process. The process

map was supplied to the PREA Compliance Manager and this included specific steps within the pre-audit, audit, and post audit phases. The auditor noted on the facility website a Data Findings and Corrective Actions Report, the agency PREA policy, a zero-tolerance statement toward all forms of sexual abuse, sexual assault, and sexual harassment, and a third-party grievance process utilized to report all criminal acts of sexual abuse or sexual harassment to the Santa Rosa Correctional Institution. This reporting method was verified, and the auditor determined a cohesive relationship exists with the community and the Santa Rosa Correctional Institution regarding sexual assault investigations. The auditor reviewed internet searches for the following considerations: pending litigation reports, Department of Justice involvement, federal consent decrees, local oversight, news articles, and press clippings. There was no negative press information provided relative to these topics within the internet search attempted. The auditor reviewed the mandatory reporting laws in Florida and determined the following legal considerations: definition of a juvenile, time calculations, age considerations, transferring requirements, and a listing of felony convictions and sentencing guidelines. The auditor reviewed the 2016 PREA Audit Report for the Santa Rosa Correctional Institution and determined the facility does not accept youthful offenders. Their population is dedicated to inmates 18 years of age or older.

The auditor submitted the pre-audit reporting notification to the PREA Resource Center and an email confirmation was received. On April 14, 2019, communication was established with the Santa Rosa Correctional Institution PREA Compliance Manager and the determination was made to utilize the Online Audit System as opposed to the written pre-audit questionnaire. The On-line Audit System includes the pre-audit questionnaire and this tool is utilized by the auditor to determine the facility information, policies, agency organization chart, contracts, staffing plans, written justifications for deviations within the staffing plan, PREA reviews, staff rounds, population reports, searches, cross-gender viewing incidents, training curriculums, training logs, special needs documentation, hiring and promotion considerations, evidence protocols, medical treatment obligations, intake screening instruments, inmate grievances, investigation reports, and data collection. The issue log was discussed and finalized as the primary means of communication to establish a record of concerns, requests, and issues provided by the auditor and the response by the PREA Compliance Manager. This system of reporting was utilized to enhance the communication process between the auditor and the PREA Compliance Manager. The PREA Compliance Manager uploads the required documentation to the Online Audit System and initiates approval for the auditor access. The auditor communicates additional requests for documentation within the issue log and the PREA Compliance Manager submits the requests to the auditor or uploads the document to the pre-audit questionnaire. On April 29, 2019, the auditor was granted access to the Online Audit System. This process created the first barrier to communication as the PREA Resource Center Help Desk advised all auditor emails were being forwarded to the spam folder and access was granted. The pre-audit questionnaire included 64 pages and 316 attachments upon completion. All documentation was reviewed by the auditor to triangulate compliance considerations, form the basis for the facility operations, terminology, structure, population, staffing, training, medical outreach, SANE/SAFE requirements, volunteer support, local advocacy, and the physical plant.

The auditor submitted the PREA Audit Notice to the PREA Compliance Manager. This included both English and Spanish versions, directions regarding the minimum 6 weeks posting requirement prior to the on-site visit, the posting must be in all inmate living areas, visible throughout the facility, utilizing large text, colored paper, must discuss the confidentiality of inmate and staff correspondence, and the facility must provide proof of posting to the auditor. The auditor submitted the on-site review agenda to the PREA Compliance Manager and the request for interview list including the following criteria: inmates with disabilities, limited English proficiency, inmates classified as lesbian, gay, bi-sexual, transgender, intersex, inmates in segregated housing, inmates who reported sexual abuse, inmates reporting sexual

victimization during risk screening, a complete staff roster, specialized staff, contractors, volunteers, grievances, incident reports, all allegations of sexual abuse and sexual harassment, all hotline calls that occurred within the last 12 months, all investigations reported in the last 12 months, and all grievances for allegations made within the last 12 months. On May 2, 2019, the auditor received confirmation from the PREA Compliance Manager and photographic evidence regarding the posting of the auditor notice in all living units. The main unit was posted on April 19, 2019, the annex on April 22, 2019, and the work camp notice was posted on April 26, 2019. This posting was confirmed during the onsite review and through random and informal staff and inmate interviews. The notice was posted within the 6-week mandate required by the standard. The facility provided the notice in both English and Spanish versions, in all inmate living areas, visible throughout the facility, utilizing large text, colored paper, and included a statement regarding confidentiality of inmate and staff correspondence. The auditor received 1 postal communication from an inmate at the main unit. A private post office box was assigned to the auditor for confidential communication from both staff and inmates. The post office box was inspected weekly, by the auditor, and continued to be inspected for correspondence throughout the post audit phase. The PREA Compliance Manager informed the auditor regarding confidential communication and described the legal mail process.

#### Audit Phase:

The on-site review began on June 11, 2019 and continued until June 14, 2019. The in-brief with facility leadership began at 0800 hours and included the following staff: Warden, Assistant Warden, PREA Compliance Manager, Secretary Specialist to the Assistant Warden of Programs, Classification Supervisor, Colonel, and two Majors. The Warden provided the welcoming and the staff introductions commenced following the auditor introduction. The auditor reviewed the agenda for the week, explained the auditor conduct and the site review process, discussed the expectations for informal interactions with staff and inmates, the file review process, interview expectations, site review, and out briefing on the final day.

The PREA Compliance Manager provided the auditor with a current inmate alpha roster, and this roster included 2,944 inmates. The amounts consisted of 1403 from the main unit, 1193 from the annex, and 348 from the work camp. The current staffing roster included 732 staff, 101 contractors, and 180 volunteers. The shift activity reports for the last 60 days were provided by the PREA Compliance Manager. All additional documents were reviewed by the auditor and included the following : specialized staff and targeted inmate population reports, a private work station with printer access, facility audit logs for the past 30 days, a list of 20 grievances submitted within the past 12 months, 65 investigative files, 63 staff personnel files 93 inmate classification files, and 93 inmate medical files. The audit methodology and selection process consisted of inmates and staff targeted populations. The auditor conducted interviews with 1 SANE Nurse, 1 Victim Advocate, and 1 hotline volunteer. The auditor reviewed the MOU for the Lakeview Center, Gulf Coast Children's Advocacy Center, and the Panhandle Forensic Nurse Specialist Scope.

The facility provided a private area for conducting formal interviews with staff and the inmate interviews were conducted in medical, housing area interview rooms, and classrooms. The selection process for conducting the inmate interviews consisted of utilizing an inmate alpha roster that is organized by housing unit and bed assignment. The auditor methodology for selecting the random inmate interviews involved inmates from all living units, PREA education dates, odd number listings, age, and length of stay. The selection process for random staff consisted of staff members from each shift, department, sworn and non-sworn staff, multiple roles, post locations, job titles, and time of service. A total of 51 interviews

were conducted with the inmate population and these consisted of the following: 33 random inmates, 1 inmate identifying as transgender, 3 inmates identifying as LGBTI, 1 limited cognitive disability, 1 limited English proficiency, 1 hard of hearing, 1 with a physical disability, 2 inmates in segregation for high risk of sexual victimization, 4 inmates who reported sexual abuse, and 4 inmates who reported sexual victimization during screening. The auditor also conducted 19 informal inmate interviews throughout the site review. The informal interviews supplied the auditor with the knowledge regarding 1 hard of hearing inmate and 1 inmate with a physical disability. No youthful inmates were available for interview as the facility does not house youthful offenders. No victims of sexual assault were available during the onsite visit as this facility has not reported any substantiated allegations in the past 12 months.

The staff interviews consisted of 69 total interviews: 29 random staff interviews, 1 contract mental health director, 2 segregated housing staff, 1 incident review team staff, 5 first responder staff, 2 volunteers, 4 intermediate staff, 2 staff that screens for victimization and abusiveness, 1 PREA Coordinator, 1 PREA Compliance Manager, 3 contract staff, 1 contract health services administrator, 4 intake staff, 1 Agency Head, 1 investigative staff, 1 facility Warden, 1 agency contract administrator, 3 human resource staff, 3 non-medical staff involved in cross gender strip searches, 1 SANE Nurse, and 2 staff designated to monitor retaliation. The informal staff interviews indicated training received regarding the proper procedures for conducting searches, exigent circumstances for conducting the searches, and efforts to enhance safety when performing searches such as utilizing the back of the hand. The staff interviews indicated no cross-gender searches have been conducted in the past 12 months. The auditor conducted 13 informal staff interviews throughout the site review and this assisted with identifying specialized staff for interviews such as the staff that monitor retaliation.

The facility site review consisted of the main unit on day one, annex day two, and the work camp on day three. The site review provided additional opportunities to conduct informal interviews with staff and inmates. The site review lasted approximately 3 days and the guides provided access to all areas within the facility. During the site review the observation consisted of looking for blind spots and the laundry area was identified as a potential blind spot. Enough video monitoring equipment was available within this area and the auditor viewed the footage in the master control center. The overall level of supervision of the inmate population was assessed and the physical plant was observed in relation to the documented facility blue prints. The auditor observed the activities associated with dayshift operations and night shift movements to include supervision practices, staff to inmate ratios, post assignments, video monitoring equipment, inmate activities, and housing unit dayroom practices. The facility master control staff provided an overview of all video monitoring equipment, camera placements in the facility, observations of PREA related materials posted in intake, reception, medical and inmate living units. The auditor notice was confirmed and verified through staff rounds and observed cross gender announcements made and documented in the logbooks. The facility restrooms, showers, and living units were inspected for compliance and the auditor observed shower curtains, restroom barriers, and private camera placements throughout the facility. The auditor observed roll call briefing for night shift and witnessed facility count and inmate movements being conducted. The auditor verified the staffing plan associated with each shift and confirmed the current staffing levels of 732 staff. The auditor observed staff during the booking process performing intake procedures, utilizing the screening instrument, verifying the classification process, providing the inmate with the PREA handout, and the auditor watched the PREA video for clarity. The PREA video described the facility zero tolerance policy, methods of reporting, detection, response, and methods to avoid manipulation that may lead to abuse. The auditor utilized the PREA hotline and observed PREA information posted throughout the facility. The inmate and staff records are stored electronically, and access is limited requiring the I.T. Manager approval. Inmate phones are in all the inmate living areas and intake section of the facility. An external reporting mechanism is available to

the inmate population by dialing 8466 on the phone system. This system is designed to allow inmates to report allegations of sexual abuse or sexual harassment to the TIPS LINE. The auditor tested this system and left a message on the provided hotline in all three facilities (main unit, annex, work camp). The PREA Compliance Manager confirmed the facility response. The hotline is provided in both English and Spanish and the facility offers a language line for diverse populations and interpreting. The facility appears to be well managed by staff and all interactions were professional and respectful. The staff and inmates appeared supportive of the facilities PREA efforts and education requirements.

The exit briefing was conducted with the following staff present: Assistant Warden of Operations, PREA Compliance Manager, Secretary Specialist, Warden, Assistant Warden of Mental Health, Colonel, Major, and two Classification Supervisors. The auditor provided a power point overview that included the following topics: positive reinforcement and compliance considerations, recommendations and areas of improvement, recommendations and areas of concern, wrap-up, and a final thought. The command staff provided an overall discussion regarding corrective action plans and the auditor authorized a thirty-day time frame to provide documentation necessary to satisfy compliance. The auditor explained the requirements for development of the interim report and provided the time frame associated with auditor compliance. The facility understands the auditor has 30 days to submit an interim report to the PREA Resource Center for review and an additional 15 days to submit the final report and completion of the audit.

#### Post Audit Phase:

The facility PREA Compliance Manager provided the necessary documentation to satisfy the recommendations during the onsite review. The specific standards provide additional information relative to auditor recommendations. The auditor reviewed all supporting revisions, documents, investigation reports, training materials, and policy changes during the post audit review. A conference call was conducted on July 15, 2019 with the Agency PREA Coordinator, Office of the Inspector General, and Florida Department of Corrections dignitaries regarding the investigative process and report requirements. This included a brief discussion regarding credibility assessments. The PREA Coordinator informed the auditor regarding continued efforts toward compliance, and this process of communication and feedback led to a delay of the final report submission. The auditor verified all corrective action efforts and continued preparation of the Final Report. The auditor and PREA Compliance Manager continued electronic communications on July 26, 2019, and finalized the implementations and recommendations associated with compliance. The Santa Rosa Correctional Institution demonstrated all corrective action procedures and practice - based on the audit requirements and additional discussion is documented in each specific standard.

## AUDIT FINDINGS

### Facility Characteristics:

The auditor's description of the audited facility should include details about the facility type, demographics and size of the inmate or resident population, numbers and type of staff positions, configuration and layout of the facility, numbers of housing units, description of housing units including any special housing units, a description of programs and services, including food service and recreation. The auditor should describe how these details are relevant to PREA implementation and compliance.

The Santa Rosa Correctional Institution is located East of Milton Florida off of Interstate 10, exit 31 at 5850 East Milton Road. The institutional property encompasses 239.6 acres of land, with a total of 94 acres inside the perimeter fences for the Main Unit, Annex, and Work Camp. There are a total of 103 buildings. The Main Unit was initially opened in September 1996 and has a maximum capacity of 1652 inmates, the Annex was opened in 2006 and has a maximum capacity of 1408 inmates, and the Work Camp was initially opened in 2010 and has a maximum capacity of 432 inmates. Santa Rosa Correctional Institution is operated by the Florida Department of Corrections and is one of fourteen major institutions in Region one. The composition of the inmate population consists of close supervision, medium supervision, minimum supervision, and community custody level male inmates. The staffing levels consist of 854 total security staff required for all three locations, 73 support staff, and supervision includes a paramilitary ranking structure. No female inmates or youthful offenders are housed at Santa Rosa Correctional Institution.

The Santa Rosa Main Unit has a total of 8 dormitories: two open bay (A&H) and six T-style dorms (B,C,D,E,F, and G dorms). The open bay dorms each house 144 inmates. The two pen bay dorms have two wings that each house 772 open population inmates. The T-style dorms each house 214 inmates. Additional areas include: Programs, work area buildings, academic, library, chapel, food service, medical, classification, mental health, warehouse, laundry, maintenance, and a commissary.

The Santa Rosa Annex currently has four secure housing unit style dormitories and four open bay style dorms. There are two secure housing style dorms (J & Q), that have been designed to accommodate the Crisis Stabilization and Transitional Care Units. Each secure housing dorm has four quads and each quad of a secure cell has single and two man cells. The total dormitory bed space is 240 per dorm. The open bay dorms have two wings with 86 beds per wing. These dorms are designed to house inmates in general population. The total combined dormitory bed space for the Annex general population is 172 per dorm. The Annex provides programming, work area buildings, chapel, food service, laundry, academic library, classification, medical, and a re-entry dorm.

The Santa Rosa Work Camp has a total of three T-style dorms which have been designed to accommodate a total of 488 beds. The inmates assigned to the camp provide services to the Main Unit, Annex, and the local community through the Community and Contract Work Squad Program. The program and work area buildings at the work camp consist of food service, education, and classification.

Santa Rosa Correctional Institution offers state of the art video monitoring equipment in order to assist in the prevention, detection, and response of sexual abuse and sexual harassment allegations. All housing units are equipped with video monitoring equipment to ensure the sexual safety of the facility. The Main Unit has 7 cameras in A dorm, 12 cameras in (B, C, D, E, F & G ) dormitories. There are 24 cameras in the MTC and 12 cameras in the Main Unit Front Support. The Annex has 17 cameras in each of J, K, L, and Q dorms, there are 8 cameras in each of M, N, O, and P dormitories. The Annex Tower has 7

cameras, 21 cameras for front support, and 9 cameras stationed for the rear support. The Work Camp has 10 cameras in each of R, S, and T dorms. The Work Camp control room has 6 cameras, there are 4 cameras in the programs building, 7 at the visiting park, 5 at the south gate, and 6 cameras positioned at the north gate. The additions of the cameras has greatly improved the sexual safety of the facility and all cameras are equipped with DVR recording capabilities. The facility offers Inter-Office Communications Link, Digital Optical Fingerprint Capture Machine, Video Imaging System, and a sophisticated Computer Network System. The control doors are equipped with centrally located control rooms, intercoms, electronic locks, and emergency keys are monitored by a 24 hour staff monitoring system. The administrative offices, training, and staff lounge are not accessible by the community and access is monitored by an intercom system and control booth access. The facility provides high grade fencing and barb wire to control the outside perimeter along with armed tower coverage. A highly trained emergency response team is available during activation requirements and trains monthly. Security supervisors are required to conduct unannounced rounds, two times per shift and the facility employs 24-hour security coverage. The auditor reviewed logbook entries, and rounds verification reports indicating compliance with this standard.

The facility provides 24-hour contracted medical care and is equal to the level of care provided within the community. This includes medical, dental, mental health care, and onsite emergency room services. The Panhandle Forensic Nurse Specialist Scope provide the Sexual Assault Nurse Examiner duties and the facility has an MOU on file with the facility. The Lakeview Center provides the confidential victim support services and the auditor viewed an MOU on file with this agency. The facility provides commissary services, numerous programs, PREA trained volunteer services, visitation, and food service.

## AUDIT FINDINGS

### Summary of Audit Findings:

The summary should include the number of standards exceeded, number of standards met, and number of standards not met, along with a list of each of the standards in each category. If relevant, provide a summarized description of the corrective action plan, including deficiencies observed, recommendations made, actions taken by the agency, relevant timelines, and methods used by the auditor to reassess compliance. Auditor Note: No standard should be found to be "Not Applicable" or "NA". A compliance determination must be made for each standard.

<b>Number of standards exceeded:</b>	0
<b>Number of standards met:</b>	45
<b>Number of standards not met:</b>	0

Number of Standards Exceeded: 0

Number of Standards Met: 45

115.11, 115.12, 115.13, 115.14, 115.15, 115.16, 115.17, 115.18, 115.21, 115.22, 115.31, 115.32, 115.33, 115.34, 115.35, 115.41, 115.42, 115.43, 115.51, 115.52, 115.53, 115.54, 115.61, 115.62, 115.63, 115.64, 115.65, 115.66, 115.67, 115.68, 115.71, 115.72, 115.73, 115.76, 115.77, 115.78, 115.81, 115.82, 115.83, 115.86, 115.87, 115.88, 115.89, 115.401, 115.403

Number of Standards Not Met: 0

The following corrective action recommendations were provided during the onsite review and all corrections have been made within the 30 day post audit phase. The result is full compliance toward all documented standards. Below is a brief synopsis of the auditor findings and facility corrective action measures. Additional information is provided within each additional standard as well as other standards that associate with those documented below.

115.22 Policies to ensure referrals of allegations for investigations - This auditor reviewed all 26 investigative reports and determined the lack of a documented credibility assessment. The considerations for credibility were included as discussed throughout the investigative staff interviews however, they were not documented within the reports. This auditor provided recommendations to the investigative staff for future implementation and the reports were revised during the onsite review. The credibility assessment section was added to the investigation report template, and the auditor reviewed addendums created by the PREA investigator. A phone conference was conducted with the PREA Coordinator, Office of the Inspector General, and Department dignitaries invested in full compliance within this standard to include the following elements within the report: staff and inmate discipline history, current and previous criminal history, prior allegations reported, prior grievances, post assignments, evaluations, reports, phone logs, visitations, and performance appraisals. The evidence provided demonstrated full compliance with this practice.

115.34 Specialized Training: Investigations - All the investigations reviewed were conducted by 1 PREA Investigator. The facility spreadsheet used to track the investigations listed shift supervisors as the investigator, but this was not correct information. The shift supervisors gather the information as the

certified PREA investigator conducts the investigation. The information gathered by the shift supervisors includes personal data information, location, photos, and concerns for immediate safety. This practice was corrected during the onsite review and the new tracking system was reviewed by this auditor. Confirmation was made to ensure shift supervisors that have not received the proper training are not viewing the video footage and closing the investigation based on the video footage. The PREA investigator must conduct the investigation and this was confirmed during the onsite review and discussed during the phone conference for clarity. The facility has fully satisfied this standard.

115.71 Criminal and Administrative Agency Investigations - This auditor reviewed all 26 investigative reports and determined the lack of a documented credibility assessment. The considerations for credibility were included as discussed throughout the investigative staff interviews however, they were not documented within the reports. This auditor provided recommendations to the investigative staff for future implementation and the reports were revised during the onsite review. The credibility assessment section was added to the investigation report template, and the auditor reviewed addendums created by the PREA investigator. A phone conference was conducted with the PREA Coordinator, Office of the Inspector General, and Department dignitaries invested in full compliance within this standard to include the following elements within the report: staff and inmate discipline history, current and previous criminal history, prior allegations reported, prior grievances, post assignments, evaluations, reports, phone logs, visitations, and performance appraisals. The facility demonstrated full compliance with this standard.

<b>Standards</b>
<p><b>Auditor Overall Determination Definitions</b></p> <ul style="list-style-type: none"> <li>• Exceeds Standard (Substantially exceeds requirement of standard)</li> <li>• Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period)</li> <li>• Does Not Meet Standard (requires corrective actions)</li> </ul>
<p><b>Auditor Discussion Instructions</b></p> <p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>

115.11	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.11 (a) - Facility PREA policy 602.053, page 2, mandates a zero tolerance toward all forms of sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment. The facility policy 602.053, page 6-12, describes the approach toward prevention, detection, reporting, and response to all forms of sexual abuse and sexual harassment. This includes facility preventive measures necessary to reduce and prevent sexual abuse and sexual harassment of inmates such as, architectural design, security supervision, video monitoring equipment, inmate orientation procedures, medical screening within 24 hours of arrival, housing considerations, separate showers, classification screenings, 30-day reassessments, facility staffing plan, staff referrals, supervisory notifications, mental health screenings, unannounced supervisory rounds, opposite gender housing announcements, community corrections procedures, and training. During the on-site review, the auditor identified staff performing opposite gender housing announcements, and unannounced supervisory rounds. The rounds were documented as unannounced in the unit logbooks. The auditor noted postings throughout the facility indicating zero tolerance toward all forms of sexual abuse, sexual battery, and sexual harassment.</p> <p>This policy includes definitions of prohibited behaviors in 602.053, page 2-5, and these definitions include sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment. Policy 602.053, page 15 explains the presumptive approach toward staff who engage in sexual abuse will be termination and prosecution referral. This was also confirmed in policy 33-208.002, page 3 of the Rules of Conduct, and policy 33-208.003, page 3 of the Range of Disciplinary Actions. Policy 602.053, page 15 describes the sanctions for contractors, volunteers, and referrals to law enforcement. Facility policy 602.053, page 15, includes disciplinary sanctions for inmates found to have participated in all forms of sexual abuse or sexual harassment. Training is provided for all inmates, staff, volunteers, and contractors for the education of the duties and responsibilities toward prevention, detection, reporting, and response procedures. Facility policy 602.053, page 8-9, provides employee, volunteer, contractor, and inmate training regarding zero tolerance for sexual abuse and sexual harassment. This policy also informs the staff how to fulfill their responsibilities toward prevention, detection, reporting, and response procedures.</p> <p>115.11 (b) – Policy 602.053, page 17-18, explains the agency employs an upper-level, agency wide PREA Coordinator and designates a PREA Compliance Manager for each facility. The PREA Coordinator position reports directly to the Director of Institutions and this position is in the facility organizational chart (Operations Manager). The auditor reviewed an appointment letter from the Florida Department of Corrections, Deputy Director of Institutional Operations, recognizing the appointment of the Statewide PREA Coordinator in November 2018.</p> <p>115.11 (c) – The PREA Compliance Manager reports directly to the facility Warden and communicates with the agency wide PREA Coordinator. This position is in the facility organizational chart (Assistant Warden of Programs). The auditor reviewed an appointment letter from the Santa Rosa Correctional Institution Warden, recognizing the appointment of the facility PREA Compliance Manager in November 2018. There is a total of 57 agency wide</p>

PREA Managers that report to the agency wide PREA Coordinator.

Interviews conducted with the PREA Coordinator and the PREA Compliance Manager confirmed sufficient time and authority to develop, implement, and oversee the efforts toward PREA compliance. Communication between this auditor, PREA Coordinator, and the PREA Compliance Manager was professional, timely, and very knowledgeable. Interviews conducted with staff, inmates, volunteers, and contractors indicated knowledge regarding the facilities zero tolerance policy toward all forms of sexual abuse and sexual harassment. The PREA Coordinator and the PREA Compliance Manager was always accessible throughout the auditing process, responded to emails and phone calls immediately, and provided adequate responses during the on-site review.

115.12	<b>Contracting with other entities for the confinement of inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	The Santa Rosa Correctional Institution does not contract with other entities for the confinement of inmates. The auditor confirmed this statement during the Agency's Contract Administrator and facility Warden interview, and referenced the 2016 PREA audit report. The auditor also reviewed a signed memo from the facility PREA Compliance Manager confirming the facility does not contract with other entities for the confinement of inmates.

115.13	<b>Supervision and monitoring</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.13 (a) – The Auditor conducted a review of the documented 2019 facility-staffing plan. Facility policy 602.030, indicates 200 positions allocated for the Annex Mental Health Unit, 177 positions for the Annex, 101 positions for the Work Camp, and 366 positions allocated for the Main Unit. This is a total of 844 positions required to mandate a Level III operation status. The facility is currently operating at a Level I status due to a total of 101 vacancies and a total vacancy rate of 11.97%. Policy 602.030, page 9, indicates a Level I operating status as staffing of posts that are critical for the daily operation of a shift. The Florida Bureau of Security Operations established the Level I staffing to ensure the continued security and safety of staff, visitors, and inmates. The institutional staffing plan is reviewed quarterly by the facility Warden and the staffing plan is reviewed annually by the PREA Coordinator. The auditor reviewed Santa Rosa Correctional Institution Annual PREA Staffing Review signed by the PREA Coordinator and reviewed by the Facility Warden. The auditor reviewed the daily operation data for the Main Unit, Annex, and the Work Camp that included 279 staff working on shift, 46 on special assignment, 80 working on an overtime status, and 55 training. The facility utilizes video monitoring equipment, positioned in specific locations for the operators to view. The video monitoring is recorded with Pelco/Ever focus cameras. Each camera has its own specific DVR. The main unit has 123 cameras, the Annex has 106 cameras, and the Work Camp has 47 cameras. The retention rate for each camera recording is 30 days. The current staffing plan and video monitoring system is adequate for the protection of inmates from sexual abuse, with no blind spots recognized. There are adequate security levels for each shift, support staff, administrative staff, maintenance staff, and management.</p> <p>The factors considered in the development of this staffing plan includes, generally accepted detention and correctional practices, no judicial findings of inadequacy from Federal, internal, or external bodies. The composition of the inmate population averaged 2934 inmates and the facility staffing plan predicated to include 3046 inmates. The staffing plan provides adequate supervisory coverage in correlation with the inmate and staff compositions. All programming activities are during dayshift hours and the facility provides additional staff to accommodate these needs with the addition of the Level II and Level III staffing requirements. This is currently being provided by overtime authorization, staff on loan, and newly hired staff. This auditor verified this process during the site inspection as the staffing levels were consistent with the daily roster report. The elements of State, Local Laws, Regulations, Standards, and other relevant factors are considered when developing the staffing plan. There were no substantiated and 7 unsubstantiated incidents considered prior to the review of the current staffing plan. Santa Rosa initiated two preventive measures to assist with the prevention of additional concerns to include, ensuring proper training of staff, and supervisory review of all audio/video footage available.</p> <p>115.13 (b) - The agency developed the Roster Management System (RMS) that documents all security personnel, and which post staff members are assigned. All deviations from the post chart are documented in an incident report. The auditor reviewed 20 incident reports indicating deviations within the staffing plan. The most common deviations consisted of FMLA status, sick leave, annual leave, and training.</p>

115.13 (c) - The PREA Coordinator and the facility Warden interviews confirmed the staffing plan is discussed numerous times throughout the year and changes are necessitated as required. The interview indicated full compliance with the provisions of this standard. The auditor reviewed a report submitted by the facility PREA Manager to the PREA Coordinator on January 30, 2019, indicating Santa Rosa made attempts to fill all vacant positions with hiring events on August 24, 2018 and October 26, 2018. The facility also holds Correctional Officer interviews every Friday. The report also describes the facility efforts to utilize PREA grant funds to purchase 50 additional cameras and 1 DVR for installation enhancements to cover any additional blind spots.

115.13 (d) - Facility Post Order 3, Shift Supervisor, page 2, informs staff regarding supervisor unannounced rounds must be made throughout the facility to deter sexual abuse or sexual harassment on each shift. Facility Post Order 1, General Orders, page 10, also includes staff are prohibited from alerting other staff members regarding the supervisor rounds and disciplinary action is the standard result of these actions. The on-site review indicated the supervisory rounds are being conducted and documented on the unit logs. The auditor reviewed variable dates for the Duty Warden records for special housing, housing unit logs, and inspections conducted by the OIC. These documents indicated rounds being conducted during day and night shift activities for the Main Unit, Annex, and the Work Camp at random intervals.

115.14	Youthful inmates
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The Santa Rosa Correctional Institution has not housed a youthful offender. Facility policy, states a youthful offender will never enter the Santa Rosa Correctional Institution. This practice was confirmed during the interview process by the education and program staff and verified by the facility population analysis of age ranges for the past 12 months. The auditor reviewed a memo provided by the PREA Audit Manager dated January 23, 2019, that specified, "Santa Rosa Correctional Institution does not house any inmate who is classified as a youthful offender". Agency policy 601.211, page 5, does not list the Santa Rosa Correctional Institution as a housing location for youthful offenders throughout the State. The facility is listed on the Florida Department of Corrections website as an adult facility.</p>

115.15	<b>Limits to cross-gender viewing and searches</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.15 (a)  Policy 33-602.204, page 2 indicates the facility shall not conduct cross-gender strip searches or cross-gender visual body cavity searches except in exigent circumstances or when performed by medical practitioners. The facility has not conducted any cross-gender strip or visual body cavity searches of inmates in the last 12 months. This includes no searches that involved exigent circumstances or performed by non-medical staff. This was confirmed through random and informal interviews with inmates and staff.</p> <p>115.15 (b)  The Santa Rosa Correctional Institution does not house female inmates as it is an all male facility. The facility Warden confirmed this statement during the on-site review. No female inmates were observed by the auditor during the on-site review. This auditor reviewed a memo dated January 25, 2019, by the PREA Compliance Manager stating, "Santa Rosa does not house inmates who are legally classified as a female offender".</p> <p>115.15 (c)  Policy 33-602.204, page 3 confirms the facility shall document all cross-gender strip searches, cross gender-visual body cavity searches, and cross-gender pat down searches of female inmates. The Santa Rosa Correctional Institution does not house female inmates as it is an all male facility. The facility Warden confirmed this statement during the on-site review. No female inmates were observed by the auditor during the on-site review. This auditor reviewed a memo dated January 25, 2019, by the PREA Compliance Manager stating, "Santa Rosa does not house inmates who are legally classified as a female offender". The Santa Rosa Correctional Institution has not performed any cross-gender strip searches or cross-gender body cavity searches.</p> <p>115.15 (d)  Policy 602.036, page 3 explains the facility shall implement policies and procedures that enable inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. This policy mandates gender specific staff are assigned to special housing units. The site review did not indicate any areas of the facility that allow staff of the opposite gender to view inmates within these listed capacities. The facility offers inmate shower curtains that do not create blind spots, half walls to protect from viewing during restroom functions, and mirrors that do not affect privacy. Informal interviews with staff and inmates did not indicate viewing of this nature. No video monitoring equipment was identified to be positioned to allow for cross- gender viewing in this capacity. The facility utilizes staff made blinds that are requested by the inmates and issued by the staff. These assist with shower usage, and restroom functions. The auditor viewed this process occurring during the on-site review. Random staff and inmate interviews confirmed daily use of this item without issue. Maintenance repairs were performed to the special housing unit shower doors as additional metal frames were installed to offer privacy for the top tier. These maintenance repairs create additional coverage to the inmate showers when staff</p>

or inmates are on the bottom tier and looking up to the shower areas.

Policy 602.036, page 4 indicates a procedure for staff of the opposite gender to announce their presence when entering an inmate housing unit. This practice was observed throughout the facility site review as staff announced their presence and documented this action in the unit logbooks. The Santa Rosa Annex and Work Camp provided signage at the door of each unit requiring this announcement.

115.15 (e)

Policy 602.053, page 6 strictly forbids staff to examine inmates for the sole purpose of determining the inmate's genital status. This policy includes transgender and intersex inmates, and if the genital status is unknown, the information will be obtained during the inmate conversations, medical records, or by performing a broader examination conducted by a medical practitioner. The Health Services Administrator confirmed this practice is prohibited during the interview process. The auditor confirmed this through random staff and inmate interviews. The classification supervisor confirmed all inmate information is utilized to ensure this process is adhered to.

115.15 (f)

Policy 602.053, page 8 indicates all sworn staff are trained to conduct proper pat down searches on inmates to include cross-gender searches. The training curriculum consists of a Power Point provided by the National PREA Resource Center, The Moss Group, Inc., and the Bureau of Justice Assistance U.S. Department of Justice titled, "Guidance in Cross Gender and Transgender Pat Searches". The lesson plan is monitored by the ETRAIN program and includes the course code PREA 001. This is a mandated training for all employees. The section of the training specific to conducting proper pat down searches is page 14 of the lesson plan. This auditor reviewed 29 staff training files from the Main Unit, 15 staff training files from the Annex, and 10 staff training files from the Work Camp, and found no discrepancies within these documents. Formal and informal interviews with staff indicated knowledge of the training and verbal demonstrations regarding proper conduct such as utilizing the back of the hand to conduct the pat-down search.

115.16	<b>Inmates with disabilities and inmates who are limited English proficient</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.16 (a)  Policy 602.053, page 8 indicates the agency has established procedures to provide disabled inmates equal opportunity to participate in or benefit from all aspects of the efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The policy includes language associated with deaf or hard of hearing inmates, blind or having low vision, inmates who have intellectual disabilities, psychiatric disabilities, speech disabilities, and limited English proficient.</p> <p>115.16 (b)  The inmate handbooks are written in both English and Spanish format. The PREA and Americans with Disabilities Act provisions are documented in policy 602.053, page 9 and indicate the following resources are available for the inmates: closed captioning, large print material, reading of materials to inmates by staff, department translator lists, and the language line services. Inmates are provided the PREA education pamphlet in their primary language and this auditor reviewed the following languages: Creole, Chinese, Portuguese, German, French, Spanish, and Russian. This auditor reviewed a memo completed by the PREA Compliance Manager on January 24, 2019, explaining the description and methods of education for Limited English Proficient and impaired or disabled inmates. The auditor reviewed the intake process and observed the closed captioning included within the television and the intake staff reading the PREA pamphlet to the inmates.</p> <p>115.16 (c)  The facility provides interpreter services with a language line service known as Language Line Services, Inc. This company also requires its interpreters to undergo a medical interpreter credentialing process. A PREA hotline number is available on the inmate phone lines and this service is available for inmates with limited reading skills in both English and Spanish. This auditor tested the number during the on-site review and an immediate response was provided. Email notifications were also received by the PREA Compliance Manager and this auditor reviewed the confirmations. Posters and signs are available throughout the facility in both English and Spanish relating to reporting mechanisms, and prevention techniques. This auditor reviewed an agency translator list indicating numerous interpretive languages. Staff training files reviewed indicated training received for managing inmates at risk of sexual abuse. Staff formal and informal interviews did not reveal any reports of utilizing inmate interpreters for incidents of sexual assault and sexual harassment. Interviews conducted with inmates with documented physical disabilities, sensory disabilities, limited English proficiencies, and cognitive disabilities did not reveal concerns regarding this standard.</p>

115.17	<b>Hiring and promotion decisions</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.17 (a) Policy 208.049, page 10 prohibits hiring or promoting anyone who may have contact with inmates and prohibits enlisting the services of any contractor who may have contact with inmates who has engaged in, been convicted of, or civilly/administratively adjudicated in sexual abuse in a prison, jail, lockup, community confinement facility, or other institution. This was confirmed during the interview with Human Resources.</p> <p>115.17 (b) Policy 208.049, page 10 requires the facility to consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates. This was confirmed during the interview with Human Resources.</p> <p>115.17 (c) The 2018 Florida Statutes, Title XXXI, Chapter 435.03 indicates a Level I screening is required by law prior to hiring. This includes the following: employment history checks, criminal history, and the Dru Sjodin National Sex Offender Public Website. Prior to hiring new employees who may have contact with inmates, criminal background records checks and efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse is completed. The auditor spoke with the human resources staff and determined 334 criminal background checks completed in the past 12 months. These record checks were through the Florida Criminal Information Network, and all current staff background checks are performed prior to employment.</p> <p>115.17 (d) In addition, 196 background checks were completed for staff covered under contracts for services that may have contact with inmates.</p> <p>115.17 (e) Policy 208.049, page 11 indicates criminal background checks conducted on all current employees, volunteers, and contractors, at least every 5 years. This was confirmed during the human resources staff interview. This is captured within the agency reporting mechanism and discussed during the human resources interview.</p> <p>115.17 (f) All applicants and employees, who may have contact with inmates, will be asked about previous misconduct in all written applications, interviews for hiring or promotion, or during written evaluations. This was confirmed during the review and interview with the background and fingerprinting staff interview.</p> <p>115.17 (g)</p>

Employees must disclose any such misconduct and any material omission or false information regarding misconduct will be grounds for termination. The 2018 Florida Statutes 435 explains failure to report criminal charges and convictions may result in disciplinary action, demotion, and termination. In addition, 50 staff files were reviewed, and no issues determined regarding this practice.

115.17 (h)

The facility tracking mechanism is documented on the applicant summary form and includes a criminal records check, valid drivers license, personal interview, proper documentation provided, Local Inmate Data System Review, social security number compliance, certification verification, correctional reference checks to include prior employers, resignations, and substantiated allegations. The PREA Compliance Manager provided documentation demonstrating a criminal history and driver history inspection was previously conducted for all staff on June 14, 2019. The PREA Compliance Manager confirmed a criminal background check is conducted prior to offering promotional opportunities and the auditor verified this process during the employee file review. The steps considered by the facility to ensure the safety of the inmates with qualified staff is impressive.

<b>115.18</b>	<b>Upgrades to facilities and technologies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.18 (a)  Facility policy 602.053, page 16 indicates when designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the agency shall consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse. The facility Warden confirmed no substantial expansions were performed within the last 12 months. However, the on-site review indicated several maintenance decisions to accommodate concerns regarding PREA. The segregation shower cells added additional metal on the outside doors to cover concerns with the lower tier viewing the upper tier showers. The outside recreation yards are equipped with a restroom area and a four foot block wall to provide the necessary privacy required. A block wall is also installed on the boulevard area in front of the mental health dorm to prevent window access to the inside.</p> <p>115.18 (b)  Facility policy 602.053, page 16 indicates when installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the agency shall consider how such technology may enhance the agency's ability to protect inmates from sexual abuse. The facility performed modifications and upgrades to the video monitoring equipment within the last 12 months. The main unit has 7 cameras in A dorm, 12 cameras in each of B, C, D, E, and F dorms. There are 24 cameras in MTC and 12 cameras in the Main Unit Front Support. The Annex has 17 cameras in each of J, K, L, and Q, dorms, and 8 cameras in each of M, N, O, and P dorms. There are 7 cameras in the Annex tower, 21 for front support, and 9 cameras along the rear support. The Work Camp has 10 cameras in each of R, S, and T dorms. There are 6 cameras assigned to the control room, 4 cameras for the programs building, and 7 cameras in the visiting parking areas. Additionally, 5 cameras were installed at the south gate, 6 along the north gate, and hand held cameras are strategically placed in lockers inside the compound for ready access during an emergency. Each camera has a fully DVR recording support and all of these modern additions were provided to assist in preventing, detecting, and responding to sexual abuse and sexual harassment allegations. The efforts provided by the facility has far exceeded the requirements of this standard. The facility Warden indicated additional grant funding is being sought to add additional video monitoring equipment and a more advanced DVR recording system.</p>

115.21	<b>Evidence protocol and forensic medical examinations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.21 (a)  Santa Rosa Correctional Institution utilizes the Office of Inspector General for conducting administrative sexual abuse and sexual harassment investigations, and has the responsibility for conducting criminal abuse investigations. The Office of Inspector General utilizes Florida Statute 944.31 and policy 108.003 as the uniform evidence protocol when conducting sexual assault investigations and forensic medical examinations. The facility policy 108.015 is the standard utilized when conducting sexual harassment and discrimination investigations.</p> <p>115.21 (b)  The Santa Rosa Correctional Institution does not house youthful offenders and this was confirmed by the agency website, onsite interviews conducted with staff, and population statistical data. Policy 108.015, page 5 explains whenever sexual abuse, sexual harassment, sexual misconduct, or voyeurism occurs the Emergency Action Center will be notified without delay. This action is an immediate reporting method to the Management Information Notification System (NIMS).</p> <p>115.21 (c)  The facility offers all inmates who experience sexual abuse access to forensic medical examinations and without financial cost to the victim. Policy 602.053, page 14 advises the facility shall offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without cost, where evidentiary or medically appropriate. The Santa Rosa Correctional Institution has an on-site medical emergency room. A total of 15 forensic medical exams were performed by SAFE/SANE, or qualified medical practitioner during the past 12 months. The number performed by a SAFE or SANE was 5, and the number performed by a qualified medical practitioner was 10. This auditor spoke with 1 SAFE Nurse and 1 qualified medical practitioner during the on-site review. The staff indicated they would provide the necessary support at the Santa Rosa Correctional Institution during the sexual assault examination and confirmed efforts toward providing advocacy services during the sexual assault exam. This was also confirmed by the PREA Compliance Manager and the Health Services Administrator during the on-site review. Santa Rosa Correctional Institution also provides on-site mental health treatment through their crisis stabilization and transitional care units. This includes activities groups, social skills training, group therapy, and medication management groups.</p> <p>115.21 (d)  The Santa Rosa Correctional Institution medical staff complete the National Institute of Corrections training curriculum regarding PREA: Medical Health Care for Sexual Assault Victims in a Confinement Setting, and PREA: Behavioral Health Care for Sexual Assault victims in a Confinement Setting. Training certificates were reviewed for medical staff and all training was verified The Lakeview Center poster was identified in all housing units, intake, and medical sections of the facility. The poster identified the 24-hour services offered by the agency, advocacy and case management, and hospital accompaniment. A 24-hour hotline number is included for all inmate access and is also included in the inmate handbook, intake</p>

PREA information, and the facility sexual abuse awareness pamphlet. The auditor observed this pamphlet was provided to inmates during the intake process.

115.21 (e)

The auditor reviewed incident reports demonstrating a victim advocate present during the sexual assault medical exam. The Lakeview Center information was provided in the sexual abuse awareness pamphlet. Policy 602.053, page 11 explains any inmate who alleges sexual abuse or sexual battery shall be given a copy of the notification of rights to have crisis intervention services. This was confirmed during the victim advocate interview, and the auditor reviewed the MOU with Lakeview Center.

115.21 (f)

The Santa Rosa Correctional Institution utilizes the Office of Inspector General for conducting administrative sexual abuse and sexual harassment investigations, and has the responsibility for conducting criminal abuse investigations.

115.21 (g)

N/A

115.21 (h)

The auditor reviewed a training certificate for the PREA Coordinator indicating training received and policy 602.053, page 11 indicates the advisement of rights shall be documented on a DC6-210 form. The facility is compliant with this standard.

115.22	<b>Policies to ensure referrals of allegations for investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.22 (a)  Santa Rosa Correctional Institution reported 65 allegations of sexual abuse and sexual harassment in the last 12 months. There were 7 total allegations resulting in an administrative investigation, and 58 cases referred for criminal investigation. The main unit reported 33 cases, the annex reported 30 cases, and the work camp reported 2 cases. There are a total of 44 cases reported that are not considered relative to sexual abuse, sexual assault, or sexual harassment and remain open and pending. Santa Rosa Correctional Institution reported 7 cases as unfounded complaints, 4 cases were not sustained, 4 cases were unsubstantiated, 3 cases suspended, and 3 open inactive cases. The Office of the Inspector General currently has a backlog of cases pending due to a shortage of investigating inspectors. All 65 cases have been reviewed and placed in a assigned category. This auditor participated in a conference call with the Office of the Inspector General, agency PREA Coordinator, and Department of Corrections dignitaries to discuss the change in reporting structures and documentation methods. The investigative reports indicated several reporting mechanisms utilized by the inmates such as notifying the staff, grievance mechanisms, facility KIOSK, medical staff, and the PREA tip line. The interviews conducted with the PREA Compliance Manager, Agency Head, and Investigator determined no allegations reported as substantiated or required prosecution referral.</p> <p>115.22 (b)  The Santa Rosa Correctional Institution PREA policy 602.053, page 12-13 requires all allegations of sexual abuse and sexual harassment to be investigated and referred for administrative review or criminal prosecution. Policy 602.053, page 12 ensures the allegation of sexual abuse or sexual harassment is referred to an agency with the legal authority to conduct criminal investigations. Florida Statute 944.31 indicates the inspector general and inspectors shall be responsible for criminal and administrative investigations in matters relating to the Department of Corrections. This notification policy is posted on the agency website and the procedures for reporting allegations. Policy 108.003 and 108.015 indicates once an allegation is referred to the Office of the Inspector General the Sexual Assault Response Team is notified, the case is assigned a number, and the information is documented in the Case Management Log Entry System. This auditor reviewed documentation indicating all 65 cases were entered into the Case Management Log Entry System. This information was provided and explained by the PREA Compliance Manager.</p> <p>115.22 (c)  Policy 602.053, page 12 indicates the Office of the Inspector General shall conduct all investigations of sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment pursuant to Florida Statute 944.31. The information provided by the agency and facility indicates compliance within this standard.</p>

<b>115.31</b>	<b>Employee training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.31 (a)  Policy 602.053, page 8 includes the zero tolerance toward sexual abuse and sexual harassment policy relating to staff training. This policy includes training requirements on how to fulfill their responsibilities for prevention, detection, reporting, and response. This policy includes all elements listed in section 115.31 (a) 1-10. Random staff interviews indicated significant knowledge regarding the zero-tolerance policy toward all forms of sexual abuse and sexual harassment, and the staff requirements toward prevention, detection, reporting, and response.</p> <p>115.31 (b)  This auditor reviewed the staff training curriculum to include rosters, power points, briefing rosters, lesson plans, and the RELIAS on-line training program. This program is an interactive testing software and specifically designed to provide the PREA training elements listed in 115.31 (a) 1-10. The facility trained all staff members in the last 12 months and provided roll-call training rosters demonstrating PREA training across all shifts. The Agency training is tailored to the gender of the inmates at the facility to include male and female inmates and staff. However, the Santa Rosa Correctional Institution is an all male inmate population. The facility utilizes the National PREA Resource Center, The Moss Group, and the Bureau of Justice Assistance U.S. Department of Justice Guidance in Cross Gender and Transgender Pat Searches power point within their training curriculum. This auditor interviewed an inmate that identified as transgender and indicated no discrepancies associated with the facilities response to searches.</p> <p>115.31 (c)  The auditor reviewed a total of 63 staff training files. This included 39 from the main unit staff, 14 from the annex staff, and 10 from the work camp. The documentation provided indicated all 63 staff received the RELIAS PREA training. A complete listing of all staff was provided by the PREA Compliance Manager to this auditor ensuring the training was received by all staff at the end of the on-site review. The RELIAS program requires a test to be completed at the end of each section to determine satisfactory completion.</p> <p>115.31 (d)  The staff random and informal interviews indicated limited ability from staff to properly identify the PREA Compliance Manager, PREA Investigator, and the PREA Coordinator as the PREA Manager was identified as all three. The facility organizational chart will be reviewed during the initial orientation to ensure proper identifications and the PREA Compliance Manager provided written documentation to this auditor ensuring the training was received at the end of the on-site review.</p>

<b>115.32</b>	<b>Volunteer and contractor training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.32 (a)  Policy 602.053, page 8 explains the zero-tolerance standard and the facility also provides a volunteer and contractor handbook to all volunteers and contractors. This auditor reviewed the handbook and this information is provided on page 4 and includes the zero-tolerance policy, requirements for preventing, reporting, detection, response, and the discipline imposed for violations of this policy. The documentation provided by the facility indicates the volunteer and contractor signature understanding the training received.</p> <p>115.32 (b)  The Santa Rosa Correctional Institution has trained 145 volunteers and 136 contractors in the last 12 months. The level of training provided is based on the services they provide and the level of contact they have with inmates. Each contractor and volunteer must complete an application and a background check is completed. The application consists of the following information: personal information, current employment information, personal identification information, education, emergency contacts, criminal history, and previous institutional experience. Each volunteer and contractor are screened through the Florida Criminal Information Network and the National Crime Information Center.</p> <p>115.32 (c)  The auditor spoke with 3 contract staff and 2 volunteers that provided information relating to the training received, handbook notifications, and background questionnaires. All 5 interviews indicated the ability to convey the zero-tolerance policy, preventive actions, notification procedures, and response practices. The inmate signs a consent form upon the initial intake screening and there are no documented concerns regarding limits to confidentiality. The auditor observed the notification process during the intake screening. The auditor reviewed 101 signed training acknowledgement forms for the Centurion contract staff. The facility Chaplain provided documentation indicating all volunteers have received the PREA Pamphlet and signed the notification indicating the volunteer understands the training received.</p>

<b>115.33</b>	<b>Inmate education</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.33 (a-f)</p> <p>Policy 601.210, page 5 discusses the inmate education requirements and includes elements (a-f) within the policy. The intake officer described the inmates receive an initial PREA document upon arrival to the intake section. The auditor observed this process during the intake screening and observed 11 detainees receive the PREA pamphlet and watch the PREA video. This document includes the facility zero tolerance policy, the inmates right to be free from sexual abuse, sexual assault, and sexual harassment and instructions for reporting an allegation by phone. The facility has set up a hotline number on the inmate phones by dialing the TIP LINE. The auditor attempted this call during the on-site review and learned this process to report an allegation. The information will then be reviewed and forwarded to the PREA Compliance Manager for immediate investigation.</p> <p>The facility also proudly displays PREA posters and one is displayed in the intake section regarding zero tolerance. The facility provides a 16 minute PREA video to the inmates in intake prior to the medical screening, and this auditor reviewed the video for quality. The video was produced by Just Detention International and includes the information in English and Spanish. The video offers closed captioning for the deaf impaired. This video training is also provided to the inmate population and the staff are required to play the video daily during a facility wide schedule. Random and informal interviews with the inmate population indicated this video is played and observed often. The intake staff are required to print an inmate orientation acknowledgement form and the inmates sign acknowledging they understand the training they have received. The auditor sampled 93 inmate files indicating receipt of the PREA brochure and viewing the video within 30 days of arrival. The files reviewed included 49 from the main unit, 28 from the annex, and 16 from the work camp. The PREA Compliance Manager and the intake officer indicated the video is played to the population immediately upon arrival. The PREA Compliance Manager reported a total of 12,635 inmates admitted during the past 12 months, and 4,314 of those inmates length of stay exceeded 30 days. This information was confirmed by the PREA Compliance Manager during the on-site interviews.</p> <p>There are several reporting methods provided to the inmates and this is discussed in the handbook. This auditor received a brief education session from an informal inmate interview regarding the use of the tablets and the TIP LINE. The inmate was very helpful in demonstrating the process to the auditor. The PREA information, handout, and Lakeview Center information was posted on the wall near the phones in every inmate living unit. Posters are visual throughout the facility reminding inmates regarding zero tolerance toward all forms of sexual abuse, sexual assault, and sexual harassment. Random and informal inmate interviews demonstrated PREA knowledge, expectations toward privacy, reporting mechanisms, retaliation monitoring, and pride in the overall sexual safety of the facility. The inmate phones are equipped with a TTY system, the facility provides a language line for numerous languages and a list of certified staff interpreters. The facility employs staff to provide the information verbally to inmates that cannot read. The efforts provided by the facility are adequate to meet the requirements of this standard.</p>



<b>115.34</b>	<b>Specialized training: Investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.34 (a-d)</p> <p>Policy 108.015, page 11 includes the specialized training requirements for the facility PREA investigators. The required training includes the following: interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action and prosecution referral.</p> <p>The facility utilizes investigators from the Office of the Inspector General and there are currently 2 investigators that remain at Santa Rosa Correctional Institution. The auditor reviewed training records indicating both investigators stationed at the facility have received specialized PREA training for investigations. This was confirmed during the investigator interviews. All investigations reviewed by the auditor were conducted by 1 PREA investigator and training records confirmed the training received. The facility spreadsheet used to track the investigations listed shift supervisors as the investigator, but this was not factual information. During the post audit phase the facility provided documented evidence as an addendum to those cases identified. The shift supervisors gather the information and the trained PREA investigator conducts the investigation. This practice was corrected during the on-site review and the new tracking mechanism was reviewed by this auditor. The tracking mechanism is an electronic monitoring program that includes: name of the participants involved, case number, inmate number, date and time, shift supervisor, evidence collected by, and the investigator assigned. Confirmation was made within all investigative documents, and confirmed during the investigator interview, the PREA investigator conducted all investigations.</p> <p>The PREA investigators completed training in 2017 presented by the Moss Group. This training titled, "Investigating Sexual Assault" provided the necessary elements required within this standard. This auditor reviewed the 126 page training outline and power points associated with this learning environment. Training certificates were also viewed for training received within the last 12 months by the RELIAS Learning titled, "PREA: Investigation Protocols". This training identified the seven PREA standards that apply to investigating sexual abuse of inmates and demonstrated six critical investigative techniques and protocols of competent investigations. The facility maintains records of all training received and is easily accessible for review. Policy 108.015, page 12 indicates training documentation will be maintained by the Bureau of Professional Development and Training. The requirements of this standard have been met by the facility.</p>

<b>115.35</b>	<b>Specialized training: Medical and mental health care</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.35 (a-d)</p> <p>Policy 602.053, page 8 explains the facility policy, procedures, and practice associated with this standard compliance, and requires all medical and mental health care practitioners to receive the required specialized PREA training. There is a total of 101 contract medical staff that work regularly in the facility and the training records indicated all 101 staff have received the initial PREA orientation and the specialized training. The specialized training is conducted by Centurion and the auditor reviewed the 63 page document and lesson outline.</p> <p>The forensic medical exams are conducted at the facility Emergency Hospital and 6 contract staff are trained on conducting forensic medical exams. The facility maintains documentation demonstrating the medical and mental health practitioners have completed and understand the training received. The Health Services Administrator, Mental Health Director, and the Health Services Assistant were interviewed and provided direct knowledge regarding how to detect and assess signs of sexual abuse and sexual harassment, how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and sexual harassment, and whom to report allegations or suspicions of sexual abuse and sexual harassment. The auditor reviewed a documented MOU with the Panhandle Nurse Specialist Scope to conduct Sexual Assault Nurse Exams (SANE). The evidence provided indicates the facility meets the requirements of this standard.</p>

115.41	<b>Screening for risk of victimization and abusiveness</b>
	<p data-bbox="252 170 896 203"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="252 248 523 282"><b>Auditor Discussion</b></p> <p data-bbox="252 327 408 360">115.41 (a-l)</p> <p data-bbox="252 371 1484 573">Policy 602.053, page 6 explains the screening procedures for risk of victimization and abusiveness. This policy explains all inmates are assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates. Inmates will also be screened upon transfer to another facility for their risk of being sexually abused or sexually abusive toward other inmates.</p> <p data-bbox="252 629 1484 1391">This auditor reviewed 93 inmate files and determined the intake screenings usually take place within the same day of arrival. The files reviewed included 49 from the main unit, 28 annex, and 16 from the work camp. None of the 93 files reviewed indicated major concerns regarding the initial intake screening. However, the auditor identified 6 files with minor concerns that the facility corrected while on site. The facility utilizes an objective classification screening instrument that includes: a classification questionnaire, a brief jail mental health screen, a booking inmate risks and needs assessment, and a PREA initial intake screening. All of these tools are based on an individual points system, yes and no responses, and classification protocol. The objective classification screening includes the following criteria for the risk of sexual victimization: inmate mental, physical, developmental disabilities, age, physical build, previous incarcerations, criminal history, violent or nonviolent behaviors, prior sex convictions, whether the inmate is perceived gay, lesbian, bisexual, transgender, intersex, or gender non-conforming, previous sexual victimization, vulnerability perceptions, or if the inmate is detained solely for civil immigration purposes. The auditor reviewed this process with the staff assigned to conduct the screening and monitored the interview being conducted. The PREA Compliance Manager indicated 5,973 inmates entered the facility within the past 12 months whose length of stay was 72 hours or longer. Records indicate 4,314 inmates were processed into the facility within the past 12 months whose length of stay exceeded 30 days.</p> <p data-bbox="252 1447 1484 1648">The objective classification system questionnaire also assesses inmates for the risk of being sexually abusive by including the following criteria: prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse. This was also confirmed during the PREA Coordinator, PREA Compliance Manager, and staff performing the screening interviews. The auditor observed this process being performed while in intake.</p> <p data-bbox="252 1704 1375 1816">Policy 602.053, page 7 indicates within 30 days of intake an inmate's risk level will be reassessed due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness.</p> <p data-bbox="252 1872 1484 2074">Policy 602.053, page 7 indicates inmates will not be disciplined for refusing to answer, or for not disclosing complete information in response to the risk screening, and the facility considers these documents to be treated in a confidential nature. Select staff are authorized to view this data and the facility information technician must authorize usage on all electronic devices. The evidence provided indicates compliance with this standard.</p>



<b>115.42</b>	<b>Use of screening information</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.42 (a-g)</p> <p>The facility utilizes the information collected from the risk screenings to inform housing, bed, work, education, and program assignments with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive. This information is provided in the agency policy 601.209, page 9-10. This was also confirmed during the interviews with the PREA Coordinator, PREA Compliance Manager, and the staff assigned to conduct the risk screening.</p> <p>This auditor spoke with 1 inmate that identifies as transgender and 3 inmates that identify as homosexual and all agreed their housing was discussed during the classification interview. They agreed to the level of housing recommended by the facility and no further issues were discussed. Agency policy 602.053, page 6 indicates the facility will make individualized determinations on a case by case basis to ensure the residents health and safety. Reassessments will occur at least twice each year or upon a change of status. This was confirmed during the intake screening staff interview.</p> <p>The facility site review provided the opportunity to confirm all inmate showers are conducted separately, a shower curtain is provided for privacy, and the inmate random and informal interviews concluded no issues reported due to other staff or inmates viewing the inmates while changing clothes, showering, or using the restrooms. The random staff interviews advised no concerns with this type of issue. The video monitoring equipment did not indicate concerns regarding this issue.</p> <p>The facility does not place lesbian, gay, bisexual, transgender, or intersex inmates in a dedicated housing facility, unit, or wing based on their status. This is strictly forbidden in policy 601.209, page 9.</p>

<b>115.43</b>	<b>Protective Custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.43 (a-e)</p> <p>Policy 602.053, page 11 clearly defines the information within this standard. Inmates at high risk of sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made, and there are no other alternative means of separation. The inmate will not be held for more than 24 hours to complete the assessment. This policy was confirmed during the interview with the facility Warden. This policy allows for programming, privileges, education, and work opportunities to the extent possible.</p> <p>This auditor reviewed the segregated housing records and spoke with the staff that supervise inmates in segregated housing. Two inmates in the past 12 months was identified to be housed in segregated housing involuntary. The initial review was conducted within 24 hours and the reassessment occurred within 7 days. Both inmates were reassigned to general population. The facility documented the privileges such as recreation, education, and programming. The inmate was not authorized work opportunities due to behavior concerns and this was documented on the segregation forms. The auditor interviewed both inmates and they advised no concerns with their housing considerations, they were able to utilize the therapeutic activity chairs, recreation areas, and games. No additional concerns were identified within this standard.</p>

<b>115.51</b>	<b>Inmate reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.51 (a-d)</p> <p>Santa Rosa Correctional Institution provides multiple methods for inmates to privately report sexual abuse, sexual assault, sexual harassment, retaliation against reporting staff neglect, and contributing factors to these incidents. These factors are described in policy 602.053, page 9-10 and they include: verbally, in writing, anonymously, third party reporting, request forms, grievance forms, sexual abuse hotline, Gulf Coast Children's Advocacy, TIPS LINE, write the Office of the Inspector General, and write the PREA Coordinator. The Gulf Coast Children's Advocacy will submit an email to the PREA Compliance Manager informing there is an issue reported. These reports are documented in writing immediately and forwarded to the facility investigator for review promptly. This information was reviewed in the facility policy, page 19 of the inmate handbook, staff handbook, PREA intake form, and the inmate training video.</p> <p>The facility has a documented Memorandum of Understanding with the Gulf Coast Children's Advocacy to provide one method of anonymous inmate reporting to a public entity that is not part of the agency. This information is posted in all inmate living units, documented on page 19 in the inmate handbook, and available upon the intake PREA form. Random and informal inmate interviews concluded knowledge of this process and one inmate volunteered to demonstrate the operation of the phone for the auditor during the on-site review. The Santa Rosa Correctional Institution does not detain inmates solely for civil immigration purposes and this was confirmed by the PREA Compliance Manager, and the Warden interviews. These calls are authorized at no cost to the inmate.</p> <p>Policy 602.053, page 9 requires all staff to report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment, retaliation against inmates or staff, and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Policy 602.053, page 11 advises the Warden or designee will monitor the conduct and treatment of inmates or staff who reported sexual abuse or sexual harassment for at least 90 days. The Warden confirmed this monitoring period during the interview process. The Warden also confirmed any allegations reported by another facility or to another facility will be performed from the agency head to the other facilities agency head in writing. This information will then be passed on to the facility PREA Investigator promptly. This was also confirmed on page 39 of the employee handbook.</p>

<b>115.52</b>	<b>Exhaustion of administrative remedies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.52 (a-g)</p> <p>Policy 33.103.006, pages 2-3 explains the administrative procedures that address inmate grievances relative to sexual abuse, sexual assault, and sexual harassment. This policy does not place a time limit for an inmate to submit a grievance relating to these topics. Inmates are not required to use any informal grievance processes when submitting a grievance regarding sexual abuse. This was confirmed during the facility Warden and PREA Compliance Manager interviews. The agency policy 33.103.011, page 1 includes elements (a-g) of this standard.</p> <p>The auditor interviewed 4 inmates that reported sexual abuse, and all 4 indicated knowledge of reporting by using the grievance procedure. All 4 inmates indicated they felt confident they would receive a response from staff if filing a grievance. Santa Rosa Correctional Institution reported 0 grievances filed regarding a sexual abuse allegation in bad faith in the last 12 months.</p>

115.53	<b>Inmate access to outside confidential support services</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.53 (a-c)</p> <p>Policy 602.053, page 10 includes the information regarding outside victim advocates for emotional support services relating to sexual abuse, sexual assault, and sexual harassment. The Santa Rosa Correctional Institution utilizes the services of the Lakeview Center, a non-profit organization providing confidential services to persons experiencing mental illness, addiction disorders, disabilities, and children who have been abused or neglected throughout Northwest Florida. Santa Rosa Correctional Institution also enlists the services of the Gulf Coast Children's Advocacy Center to provide an outside reporting mechanism for inmates. This is accomplished by inmates calling a toll free number or a speed dialing method of 8466. Gulf Coast Children's Advocacy Center is a community based volunteer program designed to enhance the quality of life for victims of sexual violence.</p> <p>The Santa Rosa Correctional Institution established a Memorandum of Understanding with Lakeview Center in 2017 and Gulf Coast Children's Advocacy Center in 2018. The auditor reviewed both documents for clarity and all signatures are current and binding. The MOU may be revised at any time by either party and the terms of the MOU do not expire without written notice by both parties. The Lakeview Center and Gulf Coast Children's Advocacy Center information is posted in all inmate living units near the phones, listed on the website, provided in the inmate handbook, and listed on the initial intake PREA form provided upon arrival to the facility. The auditor confirmed the facility provides the name, address, and phone number at no cost to the inmate and these services are confidential.</p> <p>The volunteers received training regarding the Florida mandatory reporting laws, and facility policy regarding volunteer services. Documents provided indicated updated volunteer application forms, volunteer handbook, and training rosters confirmed the information received. Since the conclusion of the site review, this auditor has received notification from the PREA Compliance Manager that all 63 volunteers have received the updated information and training. On June 13, 2019, the auditor contacted the Lakeview Center (outside advocate) for the Santa Rosa Correctional Institution and was provided helpful suggestions, therapeutic intervention, explored options, and interviewed the after hours provider. The Santa Rosa Correctional Institution does not detain persons solely for civil immigration services. This information was confirmed during the facility Warden interview.</p> <p>The staff members interviewed were able to identify the Lakeview Center as an option for confidential inmate support services. A total of 26 random inmate interviews, and 4 inmate interviews that have reported sexual assault, indicated knowledge of the Lakeview Center, identified the number, and the poster. The inmate reported feeling confident these services would be useful, but no inmates advised attempts. The PREA Compliance Manager was not aware of any current inmates that have utilized the service. The Lakeview Center volunteer confirmed inmates at Santa Rosa Correctional Institution have called the number and in the past.</p>

<b>115.54</b>	<b>Third-party reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.54 (a)</p> <p>The facility has established a procedure to receive third-party reports of sexual abuse and sexual harassment. This is described in facility policy 33-103.006, page 1-3. This information is also published on the facility's website and the notification process to complete the third-party reporting form. There are posters throughout the facility and in the front visitation lobby regarding third-party reporting and the form to file the complaint. The inmates are provided a number to contact the Gulf Coast Children's Advocacy Center, and this information is posted on the PREA intake document, inmate handbook, PREA video, and a pamphlet is posted near the inmate phones in the living units. The random and informal inmate interviews indicated knowledge of the third-party reporting methods and inmates advised they felt very comfortable reporting all allegations of sexual misconduct.</p>

<b>115.61</b>	<b>Staff and agency reporting duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.61 (a-e)</p> <p>Policy 602.053, page 10 describes the agency requirements for all staff to report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment immediately. The policy also requires the staff to report any knowledge of retaliation against inmates or staff who reported incidents and staff neglect that may have contributed to an incident or retaliation. This was confirmed during the interview with the Warden and the PREA Compliance Manager. The auditor verified this process during the random and informal staff interviews as staff conveyed the directive to notify a supervisor immediately. The staff also identified the PREA investigator as the primary source for conducting PREA investigations.</p> <p>Policy 602.053, page 10 indicates apart from reporting to designated supervisor or officials, staff shall not reveal any information related to a sexual abuse report to anyone other than to make treatment, investigation, and other security and management decisions. The auditor interviewed 14 random staff indicating knowledge of this policy and the mandatory reporting requirements. The Santa Rosa Correctional Institution does not house youthful offenders as confirmed during the census report review.</p> <p>The auditor reviewed a document provided to the inmate during the medical screening process. This document informs the inmate of the practitioners requirement to report all allegations of sexual misconduct immediately and limits the confidentiality of the inmate at the initiation of services. The auditor reviewed 93 inmate medical files and this document was included in all 93 files. This procedure was confirmed by the Mental Health Director and the Health Services Administrator during the interview process. The inmate must sign the document indicating full understanding at the time of the services.</p> <p>The auditor reviewed 65 investigative files and incident reports to conclude the investigative process was begun immediately. Policy 602.053, page 10 indicates upon notification of an incident involving sexual assault, sexual battery, or sexual harassment the shift supervisor will ensure the Emergency Action Center is contacted, all facility forms completed, and the Management Notification System report is submitted. This process will generate an incident number and the Office of the Inspector General will be notified to begin the investigation immediately. Florida Statute 794.027 requires a duty to report all allegations of sexual battery.</p>

<b>115.62</b>	<b>Agency protection duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.62 (a)  Policy 33-602.220, page 1-3 describes when the facility learns an inmate is subject to a substantial risk of imminent sexual abuse, it shall take immediate action to protect the inmate. The Warden interview indicated segregation may be ordered immediately to protect the inmate or others, but the action must be reviewed within 72 hours by the appropriate authority.</p> <p>The facility reported no incidents in the past 12 months that determine an inmate was subject to a substantial risk of imminent sexual abuse. The auditor reviewed 93 inmate classification files and determined 2 inmates were housed in segregation due to high risk for sexual victimization. The classification files revealed both inmates were housed in segregation for less than 24 hours. No program activities were interrupted due to this housing assignment. The auditor interviewed both inmates and they indicated satisfaction regarding their housing placement and did not convey any sexual safety concerns.</p>

<b>115.63</b>	<b>Reporting to other confinement facilities</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.63 (a-d)</p> <p>Policy 602.053, page 12 indicates upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility that received the allegation shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred. The Warden indicated he would personally contact the Warden at the facility where the abuse occurred, and he would expect the other agency to return the same courtesy. The Warden explained all allegations are taken seriously and treated with an immediate response. The agency policy 602.053, page 12 indicates the documented notification will occur within 72 hours and must be documented in the MINS system. Santa Rosa Correctional Institution has reported 5 allegations of sexual abuse to other facilities in the past 12 months. Santa Rosa Correctional Institution has also received 2 allegations of sexual abuse from another facility in the past 12 months. The auditor received the NIMS number and confirmed the investigative actions. The auditor reviewed email documentation for compliance regarding previously reported incidents and the notification was provided within the mandated 72-hour timeframe to the agency head and documented in an incident report.</p>

<b>115.64</b>	<b>Staff first responder duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.64 (a-b)</p> <p>Policy 602.053, page 11 describes the staff first responder duties. The policy indicates the staff responsibilities for security and non-security employees. The directives for the security staff include the following: separate the alleged victim and abuser, preserve and protect the scene, and collect the evidence if time is allotted. Do not allow the victim or abuser to participate in any activities that may destroy evidence such as: washing, brushing teeth, changing clothes, urinating, defecating, smoking, or eating. If the first responder is a non-security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence and notify a security staff member immediately.</p> <p>The facility reported 39 allegations of sexual abuse within the past 12 months, 7 cases that involved the separation of the victim and the abuser, 30 cases where physical evidence was collected, and the staff informed the inmates to not make any attempts to destroy the physical evidence. The auditor concluded staff knowledge regarding these actions throughout the facility as the auditor interviewed 4 security staff designated as first responders and 1 non-security staff. The common response was to notify a supervisor immediately and follow the four step action plan. The action plan was also noted in the employee handbook, staff training curriculum, and verified during the Warden interview. The auditor interviewed 14 random staff members, and all 14 were able to convey the action plan steps required within the policy to provide an immediate response.</p>

<b>115.65</b>	<b>Coordinated response</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.65 (a)</p> <p>Santa Rosa Correctional Institution has a written plan to coordinate actions for all staff during reported allegations of sexual abuse, sexual assault, and sexual harassment. The action plan describes the procedures for the following participants: volunteers and contractors, support staff, security staff, shift commanders and shift supervisors, first responder duties, medical and mental health practitioners, investigators, and facility leadership. The facility plan is documented, provides detailed actions for providers, and the staff were able to convey their specific duties during the random and informal interviews. The facility Warden and the PREA Coordinator interviews indicated reminders to staff regarding their specific duties annually and the auditor reviewed this information within the training plan.</p>

<b>115.66</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.66 (a)</p> <p>The auditor reviewed page 63 of the employee handbook, and Article 7 of the 2017 to 2020 Collective Bargaining Agreement and found no evidence to deny satisfactory compliance toward this standard. These documents do not limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. The Warden confirmed this process during the interview.</p>

<b>115.67</b>	<b>Agency protection against retaliation</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.67 (e)</p> <p>The agency has established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation and this is described in policy 602.053, pages 11-12. The facility classification team is the designated staff members charged with monitoring possible retaliation. The auditor also reviewed a memo posted by the PREA Compliance Manager on February 15, 2019, indicating her role in the continuing efforts toward monitoring retaliation. These positions are provided the necessary support by the Warden and during the interview process indicated an active role toward retaliation monitoring advising this is an ongoing process. Efforts toward retaliation monitoring are divided among the classification staff to include 8 staff at the main unit, 8 staff at the annex, and 1 presently at the work camp.</p> <p>The facility attempts to employ multiple protection measures by monitoring housing changes, transfers for inmate victims and abusers, removal of staff through termination, emotional support services, monitoring the inmate and staff performance evaluations, disciplinary actions, unannounced lockdowns, denial of privileges, grievances, and the inmates are provided with materials to assist the communication process. Literature is posted in the inmate handbook, posters, and methods of reporting retaliation described in the daily PREA video. The Warden indicated additional reviews may be considered every 7 days once the 90-day review has concluded. Random interviews with staff and inmates indicated no cause for concern with retaliation. The auditor interviewed the PREA Compliance Manager, 4 inmates that reported abuse, 2 inmates classified as high risk, and 1 classification manager and no interviews indicated retaliation concerns. The facility reported 7 allegations of retaliation in the past 12 months and the classification files documented the 90 day reviews.</p>

<b>115.68</b>	<b>Post-allegation protective custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.68 (a)  Policy 602.053, page 11 clearly defines the information within this standard. Inmates at high risk of sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made, and there are no other alternative means of separation. The inmate will not be held for more than 24 hours to complete the assessment. This policy was confirmed during the interview with the facility Warden. This policy allows for programming, privileges, education, and work opportunities to the extent possible.</p> <p>This auditor reviewed the segregated housing records and spoke with the staff that supervise inmates in segregated housing. Two inmates in the past 12 months was identified to be housed in segregated housing involuntary. The initial review was conducted within 24 hours and the reassessment occurred within 7 days. Both inmates were reassigned to general population. The facility documented the privileges such as recreation, education, and programming. The inmate was not authorized work opportunities due to behavior concerns and this was documented on the segregation forms. The auditor interviewed both inmates and they advised no concerns with their housing considerations, they were able to utilize the therapeutic activity chairs, recreation areas, and games. No additional concerns were identified within this standard.</p>

115.71	<b>Criminal and administrative agency investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.71 (a-l)</p> <p>The Office of the Inspector General conducts all investigations regarding allegations of sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment for the Florida Department of Corrections as required in Florida Statute 944.31. This information was confirmed during the investigator interview. Policy 602.053, page 13 requires the investigations to be conducted promptly, thoroughly, and objectively for all allegations of sexual abuse, sexual assault, and sexual harassment. The auditor reviewed 65 investigative reports to include reports from the third-party allegations and 44 cases are still active, 7 unfounded, 4 not sustained, 4 unsubstantiated, 3 open inactive, and 3 suspended cases.</p> <p>Policy 602.053, page 8 requires the agency use investigators who have specialized training in sexual abuse investigations. This training includes interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. The Office of the Inspector General will prepare compelled interviews and communicate all activities with the County Prosecutor. The compelled interviews would be conducted while moving forward throughout the investigative process and truth telling devices, such as a polygraph, would not be utilized strictly to continue the investigation. The Office of the Inspector General authorizes 2 investigators to remain at the Santa Rosa Correctional Institution and 6 are on call. The auditor verified both investigators have received the specialized PREA investigator training. All 65 investigative records reviewed by the auditor were conducted by 1 trained investigator. The facility spreadsheet used to track the investigations listed shift supervisors as the investigator but this was not factual information. The shift supervisors gather the information and the certified PREA investigator conducted all investigations and support was provided by staff interviews, reviewing investigative records, email notifications, and revised spreadsheets. The shift supervisors gathered personal data, secured the scene, and performed first responder duties.</p> <p>This auditor reviewed 18 investigative reports and determined the lack of a documented credibility assessment. The considerations for credibility were included as discussed throughout the investigative staff interviews however, they were not documented within the reports. This auditor provided recommendations to the investigative staff for future implementation and the reports were revised during the on-site review. The Agency PREA Coordinator communicated with the Office of the Inspector General to implement a change in the reporting template to include documented credibility assessments within the report. Since the conclusion of the on-site review, critical steps have been considered by the facility to include the credibility assessments within the final report. This auditor reviewed an addendum to 4 cases investigated by the facility, the review was conducted immediately by the PREA investigator, the credibility assessments were documented for staff and inmates, and the auditor verified the compliance through email notification.</p> <p>The Office of the Inspector General will review the evidence provided throughout the investigation to determine if the case will be deemed criminal or administrative. A criminal case</p>

will be consulted with the local prosecutor and the administrative case will be directed back to the facility Warden for administrative action. The Warden will consult with the investigator to determine if staff actions or failures to act contributed to the incident. All cases will be reviewed and determinations made based on the following: written reports, physical and testimonial evidence, credibility assessments, and the investigative facts and findings. All investigations are documented in a written report and maintained for as long as the alleged abuser is incarcerated or employed by the agency, and then five years thereafter. Policy 602.053, page 15 explains the departure of the alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating the investigation. All parties will cooperate with the investigation and outside licensing bodies will be notified. This was confirmed during the investigator and Warden interviews.

<b>115.72</b>	<b>Evidentiary standard for administrative investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.72 (a)  Policy 108.003, page 7 requires the agency shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. The interview with the facility PREA investigator revealed the facility standard is preponderance of the evidence.</p>

<b>115.73</b>	<b>Reporting to inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.73 (a-e)</p> <p>Policy 108.003, page 15 requires following an investigation into an inmates allegation of sexual abuse, the agency must inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. The auditor reviewed a documented investigation and written notification to the inmate was provided as an unfounded complaint. The PREA Compliance Manager reported 10 investigations completed in the last 12 months and 10 notifications were documented as issued to the inmate.</p> <p>Policy 108.015, pages 10-11 requires if the allegation that a staff member has committed sexual abuse against the inmate, the agency shall subsequently inform the inmate whenever the staff member is no longer posted in the inmates unit, no longer employed at the facility, indicted on a charge, or have been convicted on a charge related to sexual abuse. The policy reflects these steps are not required if the results of the allegation are unfounded. The facility reported zero substantiated allegations documented within the last 12 months against a staff member. Policy 108.015, pages 10-11 requires when the allegation is the result of sexual abuse by another inmate, the facility must notify the victim when the agency learns that the alleged abuser has been indicted on a charge, or convicted on a charge, and these steps are not required if the results of the allegation is unfounded.</p> <p>The facility Warden and the PREA investigator confirmed this communication process during the on-site review. The PREA Coordinator indicated knowledge of this occurring throughout the investigative process. This auditor reviewed documentation of this notification process occurring during the on-site review.</p>

<b>115.76</b>	<b>Disciplinary sanctions for staff</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.76 (d)</p> <p>The presumptive disciplinary sanction for staff who has engaged in sexual abuse at the Santa Rosa Correctional Institution is termination and this is explained in policy 208.039, page 8. This policy was confirmed by the Warden during the interview process and reviewed by the auditor in the employee handbook. Staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse and sexual harassment policies. The disciplinary action is commensurate with the acts committed, staff disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.</p> <p>The facility reported 2 incidents in the past 12 months for staff who have been terminated or disciplined for violation of the agency sexual abuse or sexual harassment policies. The auditor reviewed the disciplinary action of staff and the sanctions imposed was termination. The Warden confirmed past incidents being referred to law enforcement for prosecution and notifying the applicable licensing board such as the Criminal Justice Services, Board of Nursing, and the Department of Education. These notifications occur upon termination or resignations in lieu of termination. This is required by Florida Statute 944.35 and the Office of the Inspector General.</p>

<b>115.77</b>	<b>Corrective action for contractors and volunteers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.77 (a-b)</p> <p>Policy 205.002, page 19 requires any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with inmates and shall be reported to law enforcement agencies. This procedure is not enforced if the activity is clearly not criminal or the allegation is unfounded. Notifications will also be made to relevant licensing bodies and the facility shall take appropriate remedial measures to determine further contact with inmates in the case of any other violation of agency sexual abuse or sexual harassment. The facility did not report any volunteer or contractor terminations, discipline, law enforcement referrals, or notifications to relevant licensing bodies for violations of sexual abuse, sexual assault, or sexual harassment. This was confirmed during the Warden interview and informal interviews with the command staff.</p>

<b>115.78</b>	<b>Disciplinary sanctions for inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.78 (a-g)</p> <p>Policy 602.053, page 15 informs inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for sexual abuse. The facility reported no administrative findings of inmate-on-inmate sexual abuse or criminal findings in the past 12 months. This was confirmed by the facility Warden, Health Services Administrator, Mental Health Director, and 93 inmate medical files reviewed. The Mental Health Director indicated potential screenings to address or correct the underlying reasons or motivations for abuse. The facility utilizes medical contractors for assistance and the Lakeview Center for counseling services. Santa Rosa Correctional Institution also provides a crisis stabilization and transitional care unit that offers individual psychotherapy, weekend activity groups, outdoor recreation, therapeutic community group, and compression 100.</p> <p>Policy 602.053, page 15 advises the facility may discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact. The facility prohibits disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish enough evidence to substantiate the allegation. The facility prohibits all sexual activity between inmates and may discipline inmates for such activity.</p>

<b>115.81</b>	<b>Medical and mental health screenings; history of sexual abuse</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.81 (a-e)</p> <p>The auditor reviewed 93 electronic medical files and reviewed the facility policy regarding inmates experiencing prior victimization and abusiveness. Policy 602.053, pages 13-14 provides this information and verifies staff shall ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake process. This was also confirmed during the interview with the Mental Health Director.</p> <p>The auditor identified concerns with the tracking mechanism presented by the medical staff regarding the 14 day reviews. The staff member from intake will generate the referral request based on the information received during the screening. The referral will be noted in the medical files and this begins an internal time clock to track the number of days until the 14 day review is completed. The medical staff must clear the request from the system or the clock will continue to track the number of days pending review. The auditor observed 33% of all referrals were not being cleared within the system however; the medical file demonstrated the 14 day review was completed on time. During the post audit phase the Mental Health Staff provided documentation demonstrating all 14 day reviews were completed on time. The Mental Health Director implemented a supervisory inspection to be included within the tracking system to ensure that all records were imputed in the tracking system and the inmate file. Email communication was provided to the auditor to ensure the tracking system was compliant and 3 examples of 14 day reviews completed during the post audit phase. The efforts completed during the post audit phase indicate the necessary revisions to ensure satisfactory compliance within this standard.</p> <p>The medical staff and authorized staff are provided a user name and password to access the medical records. This information is strictly for treatment plans, housing decisions, bed assignments, work details, educational programming, or as otherwise required by federal, state, and local law. The medical screening form is signed by inmates to provide consent for professional health care services and to receive instructions regarding access to medical, dental, and mental health care.</p>

<b>115.82</b>	<b>Access to emergency medical and mental health services</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.82 (a-d)</p> <p>Policy 602.053, page 14 requires inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. The facility offers 24-hour medical care and 24-hour crisis intervention services. The facility provides on site emergency room care and utilizes the Panhandle Forensic Nurse Specialist Scope for the SAFE/SANE exams. The Lakeview Center provides 24-hour counseling and crisis intervention services and the facility supports it own crisis stabilization and transitional care units. The Panhandle Forensic Nurse Specialist Scope performs all sexual assault examinations and offers prophylaxis to safeguard from sexually transmitted diseases. The SANE provides the notification to the Lakeview Center for on-site advocacy during the exam. The volunteers will be notified to provide crisis intervention services and advocacy. The level of care at the Santa Rosa Correctional Institution is consistent with the level of care demonstrated within the community. The auditor spoke with the SANE staff and confirmed on-site exams are conducted with the presence of a volunteer advocate. The auditor reviewed the MOU for the Lakeview Center and the Panhandle Forensic Nurse Specialist Scope.</p> <p>This auditor reviewed the inmate handbook provided by the facility to ensure compliance. The treatment services are provided to every victim without financial cost, regardless of whether the victim names an abuser or cooperates with any investigation arising out of the incident. This was confirmed by the Health Services Administrator and no concerns were present during the informal inmate interviews. No victims of sexual assault were available during the on-site review as this facility has not reported an substantiated allegations in the past 12 months. The auditor interviewed 4 inmates who have reported sexual abuse and they did not indicate any concerns within this standard.</p>

<b>115.83</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.83 (a-h)</p> <p>The facility Mental Health Director indicated the facility offers medical and mental health evaluation and treatment to all inmates who have been victimized by sexual abuse. The Mental Health Director advised the evaluation and treatment plans are consistent with the level of care demonstrated within the community. At times, the inmate may qualify for additional services due to their status. The inmate treatment plans may consist of referrals for continued care, medications, transfers to other facilities, or accommodations upon release. Santa Rosa Correctional Institution does not house female offenders.</p> <p>Policy 602.053, page 14 advises inmate victims will be offered tests for sexually transmitted infections and all treatment services will be provided at no cost to the victim. This information is supported in the inmate handbook. The Lakeview Center will also provide outside emotional support services and their volunteers are also on-site conducting programs. This information was confirmed during the Health Services interview and the informal staff interviews. The informal inmate interviews expressed knowledge regarding the free medical, mental health, and emotional support services offered at the facility. The Lakeview Center information was posted near every phone in the inmate living units. All 26 random inmate interviews confirmed knowledge of this service. The Mental Health Director confirmed the 60 day mental health assessments are conducted for inmate-on-inmate abusers.</p>

<b>115.86</b>	<b>Sexual abuse incident reviews</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.86 (a-e)</p> <p>Policy 602.053, page 16 mandates the facility conduct a sexual abuse incident review at the end of every sexual abuse investigation unless the allegation has been determined to be unfounded. This incident review must be conducted within 30 days of the conclusion of the investigation. This process was confirmed by the Warden and PREA Compliance Manager interviews. The incident review team consists of the following: Assistant Warden, Security Chief, Classification Supervisor, and the team receives input from line supervisors, investigators, and medical and mental health staff.</p> <p>The facility presents a report of its findings from the sexual abuse incident reviews and makes a final recommendation for improvement or documents the reasons for not performing improvements. The criteria included within the reviews consists of the following: policy revisions, incident motivations by race, ethnicity, gender identity, lesbian, gay, bi-sexual, transgender, intersex, gang affiliation, physical barriers that may have contributed to the abuse, adequate staffing levels, video monitoring equipment or lack of, mandated training by staff and inmates, appropriate supervision, notifications, and operational considerations. The Warden confirmed the facility recently received a grant for additional video monitoring equipment and is requesting additional cameras in the future. The auditor reviewed 2 incident review documents and noted the information was provided within the form. The Warden confirmed review of 44 reported facility incident reviews.</p>

<b>115.87</b>	<b>Data collection</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.87 (a-f)</p> <p>The auditor reviewed the facility uniform data for every allegation of sexual abuse and compared the data to the most recent version of the Survey of Sexual Violence (SSV) conducted by the Department of Justice. The facility aggregates the incident-based sexual abuse data annually and includes definitions as appropriate to the Survey of Sexual Violence. The auditor reviewed the data collected in 2017, 2018, and to date in 2019 as the data is compiled for a one-year (calendar) period after December. The Santa Rosa Correctional Institution does not operate another facility or contract with other facilities for the confinement of its inmates. The PREA Compliance Manager securely maintains all documentation used to compile the information and the Office of the Inspector General maintains the investigative data and records. Approved data is posted on the Agency website and available upon request by the Department of Justice.</p>

<b>115.88</b>	<b>Data review for corrective action</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.88 (a-d)</p> <p>Policy 602.053, pages 14-15 requires the facility to review data collected and aggregate to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training. This auditor reviewed the data posted on the facility website that includes the total number of substantiated, unsubstantiated, and unfounded allegations of sexual misconduct by inmate-to-inmate and staff-to-inmate reports in 2017, 2018, and current data for 2019. This information is approved by the facility Warden and posted on the facility website for review.</p> <p>The agency PREA Coordinator advised this information is utilized to identify problem areas and initiate corrective action measures when appropriate. The facility Warden confirmed the use and data associated with this report during the interview. The data report demonstrates huge efforts toward a reduction in facility sexual assault allegations as the 2018 figures are much lower than the 2017 report. No facility data was redacted from the annual report for publication and this was verified by the PREA Compliance Manager. The facility video monitoring equipment upgrades have contributed significantly to the reduction of allegations and required reviews.</p>

<b>115.89</b>	<b>Data storage, publication, and destruction</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.89 (a-d)</p> <p>The PREA Coordinator indicated all documentation utilized for data collection is maintained by the PREA Compliance Manager. The PREA Compliance Manager collects the data and maintains electronic files on a secure server. The data report is approved by the Agency Director and the Facility Warden and posted on the Agency website annually. The auditor reviewed the report and did not observe any personally identifying information. Policy 602.053, page 15 requires the facility shall maintain sexual abuse data collected for at least 10 years after the date of the initial collection unless Federal, State, or local law requires otherwise.</p>

<b>115.401</b>	<b>Frequency and scope of audits</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.401(a-n)</p> <p>The Santa Rosa Correctional Institution received its first PREA Audit Report on February 1, 2017, and was found in compliance on 40 standards, not compliant on standard 115.13, and 2 standards were not applicable at that time. The auditor reviewed the report on the facility website during the pre-audit phase. The Santa Rosa Correctional Institution operates the main unit, annex, and the work camp. This was confirmed by the facility PREA Compliance Manager and the site review.</p> <p>The auditor was authorized complete access to the entire facility and provided this access during the on-site review. No restrictions were placed on the auditor during the pre-audit, on-site review, and post audit phases. The auditor received all documents requested and was provided electronic viewing upon request. The on-site review provided the auditor the opportunity to conduct private interviews with inmates, staff, volunteers, and contractors without limitations. The facility PREA Compliance Manager provided photographic evidence regarding the posting of the PREA Audit Notification in all inmate living units on April 19, 2019 main unit, April 22, 2019 Annex, and April 26, 2019 Work Camp. This posting provided the inmates and staff a name and mailing address for the auditor. The auditor confirmed this posting during the on-site review as staff and inmate interviews validated the posting at least 6 weeks prior to the on-site review.</p>

<b>115.403</b>	<b>Audit contents and findings</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.403 (a-f)</p> <p>The final audit was published on the facility website and the auditor reviewed all documentation and compliance efforts. The auditor attempted to confirm all prior recommendations completed from the previous audit. The facility has received 1 prior PREA audit report on February 1, 2017 and the facility was reported compliant with 40 standards, non-compliant with standard 115.13, and 2 standards were not applicable. This document was confirmed by the facility PREA Compliance Manager.</p>

## Appendix: Provision Findings

115.11 (a)	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes

115.11 (b)	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes

115.11 (c)	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes

115.12 (a)	<b>Contracting with other entities for the confinement of inmates</b>	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	na

115.12 (b)	<b>Contracting with other entities for the confinement of inmates</b>	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates OR the response to 115.12(a)-1 is "NO".)	na

115.13 (a)	<b>Supervision and monitoring</b>	
	Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the generally accepted detention and correctional practices in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration any judicial findings of inadequacy in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from Federal investigative agencies in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from internal or external oversight bodies in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration all components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated) in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the composition of the inmate population in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into	yes

	consideration the number and placement of supervisory staff in calculating adequate staffing levels and determining the need for video monitoring?	
	Does the agency ensure that each facility's staffing plan takes into consideration the institution programs occurring on a particular shift in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration any applicable State or local laws, regulations, or standards in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the prevalence of substantiated and unsubstantiated incidents of sexual abuse in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration any other relevant factors in calculating adequate staffing levels and determining the need for video monitoring ?	yes

<b>115.13 (b)</b>	<b>Supervision and monitoring</b>	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	yes

<b>115.13 (c)</b>	<b>Supervision and monitoring</b>	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes

115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes

115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na

115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na

115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na

115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes

115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates in non-exigent circumstances? (N/A here for facilities with less than 50 inmates before August 20,2017.)	yes
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A here for facilities with less than 50 inmates before August 20,2017.)	yes

115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates?	yes

115.15 (d)	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility implement a policy and practice that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	no

115.15 (e)	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes

115.15 (f)	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

115.16 (a)	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all	yes

	aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision?	
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes.)	yes
	Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing?	yes
	Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have intellectual disabilities?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes

115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes

115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes

115.17 (a)	<b>Hiring and promotion decisions</b>	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes

115.17 (b)	<b>Hiring and promotion decisions</b>	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates?	yes

115.17 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with inmates, does the agency: perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency: consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes

115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes

115.17 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes

115.17 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes

<b>115.17 (g)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes

<b>115.17 (h)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes

<b>115.18 (a)</b>	<b>Upgrades to facilities and technologies</b>	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na

<b>115.18 (b)</b>	<b>Upgrades to facilities and technologies</b>	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	yes

115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	na
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice’s Office on Violence Against Women publication, “A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents,” or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes

115.21 (d)	<b>Evidence protocol and forensic medical examinations</b>	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member?	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes

115.21 (e)	<b>Evidence protocol and forensic medical examinations</b>	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes

115.21 (f)	<b>Evidence protocol and forensic medical examinations</b>	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating entity follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	na

115.21 (h)	<b>Evidence protocol and forensic medical examinations</b>	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency attempts to make a victim advocate from a rape crisis center available to victims per 115.21(d) above.)	na

115.22 (a)	<b>Policies to ensure referrals of allegations for investigations</b>	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes

115.22 (b)	<b>Policies to ensure referrals of allegations for investigations</b>	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes

115.22 (c)	<b>Policies to ensure referrals of allegations for investigations</b>	
	If a separate entity is responsible for conducting criminal investigations, does such publication describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	na

115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes

115.31 (b)	<b>Employee training</b>	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes

115.31 (c)	<b>Employee training</b>	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes

115.31 (d)	<b>Employee training</b>	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes

115.32 (a)	<b>Volunteer and contractor training</b>	
	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes

115.32 (b)	<b>Volunteer and contractor training</b>	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes

<b>115.32 (c)</b>	<b>Volunteer and contractor training</b>	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes

<b>115.33 (a)</b>	<b>Inmate education</b>	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes

<b>115.33 (b)</b>	<b>Inmate education</b>	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes

<b>115.33 (c)</b>	<b>Inmate education</b>	
	Have all inmates received such education?	yes
	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes

115.33 (d)	Inmate education	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes

115.33 (e)	Inmate education	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes

115.33 (f)	Inmate education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes

115.34 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

115.34 (b)	<b>Specialized training: Investigations</b>	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

115.34 (c)	<b>Specialized training: Investigations</b>	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

115.35 (a)	<b>Specialized training: Medical and mental health care</b>	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment?	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse?	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment?	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment?	yes

<b>115.35 (b)</b>	<b>Specialized training: Medical and mental health care</b>	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams.)	na

<b>115.35 (c)</b>	<b>Specialized training: Medical and mental health care</b>	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere?	yes

<b>115.35 (d)</b>	<b>Specialized training: Medical and mental health care</b>	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31?	yes
	Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.32?	yes

<b>115.41 (a)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes

<b>115.41 (b)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes

115.41 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes

115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?	yes

115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: history of prior institutional violence or sexual abuse?	yes

115.41 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes

115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a: Referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a: Request?	yes
	Does the facility reassess an inmate's risk level when warranted due to a: Incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to a: Receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes

115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes

<b>115.41 (i)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?	yes

<b>115.42 (a)</b>	<b>Use of screening information</b>	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes

<b>115.42 (b)</b>	<b>Use of screening information</b>	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes

115.42 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?	yes

115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes

115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes

115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes

115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status?	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status?	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status?	yes

115.43 (a)	Protective Custody	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes

115.43 (b)	Protective Custody	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The opportunities that have been limited?	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The duration of the limitation?	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The reasons for such limitations?	yes

115.43 (c)	Protective Custody	
	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes

115.43 (d)	Protective Custody	
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes

115.43 (e)	Protective Custody	
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes

115.51 (a)	Inmate reporting	
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes

115.51 (b)	Inmate reporting	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security?	yes

115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes

115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes

115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no

115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes

115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes

115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes

115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes

115.52 (f)	<b>Exhaustion of administrative remedies</b>	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes

115.52 (g)	<b>Exhaustion of administrative remedies</b>	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes

115.53 (a)	<b>Inmate access to outside confidential support services</b>	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies?	yes
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes

115.53 (b)	<b>Inmate access to outside confidential support services</b>	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes

115.53 (c)	<b>Inmate access to outside confidential support services</b>	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes

115.54 (a)	<b>Third-party reporting</b>	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes

115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes

115.61 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes

115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes

115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes

<b>115.61 (e)</b>	<b>Staff and agency reporting duties</b>	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes

<b>115.62 (a)</b>	<b>Agency protection duties</b>	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes

<b>115.63 (a)</b>	<b>Reporting to other confinement facilities</b>	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes

<b>115.63 (b)</b>	<b>Reporting to other confinement facilities</b>	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes

<b>115.63 (c)</b>	<b>Reporting to other confinement facilities</b>	
	Does the agency document that it has provided such notification?	yes

<b>115.63 (d)</b>	<b>Reporting to other confinement facilities</b>	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes

115.64 (a)	Staff first responder duties	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes

115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes

115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes

<b>115.66 (a)</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes

<b>115.67 (a)</b>	<b>Agency protection against retaliation</b>	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes

<b>115.67 (b)</b>	<b>Agency protection against retaliation</b>	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes

115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes

115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes

<b>115.67 (e)</b>	<b>Agency protection against retaliation</b>	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes

<b>115.68 (a)</b>	<b>Post-allegation protective custody</b>	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes

<b>115.71 (a)</b>	<b>Criminal and administrative agency investigations</b>	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes

<b>115.71 (b)</b>	<b>Criminal and administrative agency investigations</b>	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes

<b>115.71 (c)</b>	<b>Criminal and administrative agency investigations</b>	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes

<b>115.71 (d)</b>	<b>Criminal and administrative agency investigations</b>	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes

<b>115.71 (e)</b>	<b>Criminal and administrative agency investigations</b>	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes

<b>115.71 (f)</b>	<b>Criminal and administrative agency investigations</b>	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes

<b>115.71 (g)</b>	<b>Criminal and administrative agency investigations</b>	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes

<b>115.71 (h)</b>	<b>Criminal and administrative agency investigations</b>	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes

<b>115.71 (i)</b>	<b>Criminal and administrative agency investigations</b>	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes

<b>115.71 (j)</b>	<b>Criminal and administrative agency investigations</b>	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes

<b>115.71 (l)</b>	<b>Criminal and administrative agency investigations</b>	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

<b>115.72 (a)</b>	<b>Evidentiary standard for administrative investigations</b>	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes

<b>115.73 (a)</b>	<b>Reporting to inmates</b>	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes

<b>115.73 (b)</b>	<b>Reporting to inmates</b>	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	na

115.73 (c)	Reporting to inmates	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes

115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes

<b>115.73 (e)</b>	<b>Reporting to inmates</b>	
	Does the agency document all such notifications or attempted notifications?	yes

<b>115.76 (a)</b>	<b>Disciplinary sanctions for staff</b>	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes

<b>115.76 (b)</b>	<b>Disciplinary sanctions for staff</b>	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes

<b>115.76 (c)</b>	<b>Disciplinary sanctions for staff</b>	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes

<b>115.76 (d)</b>	<b>Disciplinary sanctions for staff</b>	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes

115.77 (a)	<b>Corrective action for contractors and volunteers</b>	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes

115.77 (b)	<b>Corrective action for contractors and volunteers</b>	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes

115.78 (a)	<b>Disciplinary sanctions for inmates</b>	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes

115.78 (b)	<b>Disciplinary sanctions for inmates</b>	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes

115.78 (c)	<b>Disciplinary sanctions for inmates</b>	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes

<b>115.78 (d)</b>	<b>Disciplinary sanctions for inmates</b>	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes

<b>115.78 (e)</b>	<b>Disciplinary sanctions for inmates</b>	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes

<b>115.78 (f)</b>	<b>Disciplinary sanctions for inmates</b>	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes

<b>115.78 (g)</b>	<b>Disciplinary sanctions for inmates</b>	
	Does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes

<b>115.81 (a)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening?	yes

<b>115.81 (b)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes

<b>115.81 (c)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening?	yes

<b>115.81 (d)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes

<b>115.81 (e)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes

<b>115.82 (a)</b>	<b>Access to emergency medical and mental health services</b>	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes

115.82 (b)	<b>Access to emergency medical and mental health services</b>	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes

115.82 (c)	<b>Access to emergency medical and mental health services</b>	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes

115.82 (d)	<b>Access to emergency medical and mental health services</b>	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes

115.83 (a)	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes

115.83 (b)	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes

<b>115.83 (c)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes

<b>115.83 (d)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if all-male facility.)	na

<b>115.83 (e)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if all-male facility.)	na

<b>115.83 (f)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes

<b>115.83 (g)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes

<b>115.83 (h)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes

<b>115.86 (a)</b>	<b>Sexual abuse incident reviews</b>	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes

<b>115.86 (b)</b>	<b>Sexual abuse incident reviews</b>	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes

<b>115.86 (c)</b>	<b>Sexual abuse incident reviews</b>	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes

115.86 (d)	<b>Sexual abuse incident reviews</b>	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes

115.86 (e)	<b>Sexual abuse incident reviews</b>	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

115.87 (a)	<b>Data collection</b>	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes

115.87 (b)	<b>Data collection</b>	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes

<b>115.87 (c)</b>	<b>Data collection</b>	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes

<b>115.87 (d)</b>	<b>Data collection</b>	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes

<b>115.87 (e)</b>	<b>Data collection</b>	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	na

<b>115.87 (f)</b>	<b>Data collection</b>	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes

<b>115.88 (a)</b>	<b>Data review for corrective action</b>	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes

<b>115.88 (b)</b>	<b>Data review for corrective action</b>	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes

<b>115.88 (c)</b>	<b>Data review for corrective action</b>	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes

<b>115.88 (d)</b>	<b>Data review for corrective action</b>	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes

<b>115.89 (a)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes

<b>115.89 (b)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes

<b>115.89 (c)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes

<b>115.89 (d)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes

<b>115.401 (a)</b>	<b>Frequency and scope of audits</b>	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes

<b>115.401 (b)</b>	<b>Frequency and scope of audits</b>	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	yes
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na

<b>115.401 (h)</b>	<b>Frequency and scope of audits</b>	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes

<b>115.401 (i)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes

<b>115.401 (m)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes

<b>115.401 (n)</b>	<b>Frequency and scope of audits</b>	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes

<b>115.403 (f)</b>	<b>Audit contents and findings</b>	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports within 90 days of issuance by auditor. The review period is for prior audits completed during the past three years PRECEDING THIS AGENCY AUDIT. In the case of single facility agencies, the auditor shall ensure that the facility's last audit report was published. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or in the case of single facility agencies that there has never been a Final Audit Report issued.)	yes